

POOR LEGIBILITY

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DUE TO THE QUALITY OF THE ORIGINAL

FOIA Exemption 6 Personal Privacy

Oct. 31, 1998

U. S. Environmental Protection Agency, Region IX
75 Hawthorne St.
San Francisco, Ca. 94105

Attention:

Kim Muratore (SFD-7-B
Andrea Benner
Kathy Steuer

Attached is the answers to questions you asked regarding My property, 9630 Santa Fe Springs Rd., Santa Fe Springs, Ca.. In addition a report from the firm that did the clean-up in 1990 and 1991. (Clean-Up Technology). It also covered the property at 9620 Santa Fe Springs Rd.

1. Date property purchased:

9620 Santa Fe Rd. Year 1961.

9630 Santa Fe Springs Rd.. Year 1963.

Properties were split in 1996 between Maple and Ferris.
Maple 9630 Santa Fe Springs Rd. 100%
Ferris 9620 Santa Fe Springs Rd. 100%

2. Maple property is not owned by a Trust. You will have to check with Ferris regarding ownership.
3. (1.) John I. Maple Inc. occupied property until 1975.
(2.) Construction Yard.
(3.) Years 1961 to 1975. Sleaf Craft Boats occupied A part of the property starting 1970 (?) til they took over the entire property 1980s
3. b. 1. Sleaf Craft Boats.
2. Boat Builders.
3. Lease no longer available.
4. Unknown 1989 declared bankruptcy.
5. 1970 - 1989 and 1989 - 1991 by another boat operator.
3. c. 1. Leased to Gold Coast Refractories in 1992.
2. Build and or rebuild refractories (cement). Some of the work performed in the yard some at job site.
3. Business still located at 9630 Santa Fe Springs Rd.

JOHN I. MAPLE

FOIA Exemption 6 Personal Privacy

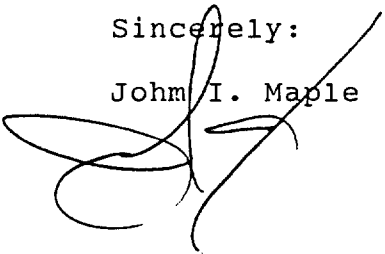
Pg. 2

4. a. After boat building operation discontinued in 1991 the property was cleaned up. (See attached report by Clean-Up Technology Inc.).
5. Enclosed documents.
6. No wastes other than (4.)
7. No leaks other than answer to 4.
8. No knowledge of any contamination at the time of purchase of property.
9. No knowledge of dumping or disposal on other properties.
10. No knowledge of disposal activities on W.D.I. site.
11. No other wastes found other than documented in answer to #4.
12. Never encountered other wastes than stated.
13. No knowledge of any tanks below ground on my property.
14. a. Sewer line on south side of property to street. Telephone, electric same. No fuel lines, septic tanks or other tanks on My property or the property at 9620 Santa Fe Springs Rd.
15. No knowledge of any person with Historical information.
16. No individual assisted in this response.
17. I know of no one who might be able to provide more information to this response.

I trust the above will answer your questions relative to 9620 and 9630 Santa Fe Springs Rd.

Sincerely:

John I. Maple



CUT

Clean-Up Technology Inc.

February 20, 1991

Mr. John Maple
Maple-Ferris Partnership
10601 Norwalk Boulevard
Santa Fe Springs, CA 90670

RE: Closure Report
Above Ground and Underground
Storage Tanks
Sleekcraft Boat Site
9620 Santa Fe Springs Road
Santa Fe Springs, CA
CUT Job #90-035

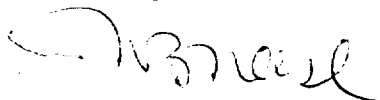
Dear John:

We have enclosed your copy of the Closure Report for the referenced site. A copy has been submitted to Los Angeles County Department of Public Works (LACDPW) and Los Angeles County Fire Department (LACFD). A closure letter will be issued by the LACDPW upon their review of the Closure Report.

We appreciate the opportunity to have worked with you on this project. We look forward to working with you in the future.

Please call if you have any questions.

Sincerely,



William B. Reese, R.G., R.E.A.
President, Clean-Up Technology, Inc.

WBR:dz

Enclosures

cc: LACDPW, LACFD

Bjob290-035G

11400 West Olympic Blvd., 2nd Floor, Los Angeles, CA 90064-1507
(213) 445-8868 Fax (213) 445-8800



Clean-Up Technology Inc.

LETTER OF TRANSMITTAL

TO: Mr. John Maple
Maple-Ferris Partnership
10601 Norwalk Blvd.
Santa Fe Springs, CA 90670

DATE: February 25, 1991
RE: Closure Report for
Sleakcraft Boat Site
Santa Fe Springs, CA

WE ARE FORWARDING TO YOU HEREWITH THE FOLLOWING:

() DRAWINGS () PROPOSAL () CHANGE ORDER
() REVISED PROPOSAL (x) REPORT () INVOICE
() OTHER: _____

INFORMATION SUBMITTED FOR:

() YOUR APPROVAL () YOUR REVIEW (x) YOUR FILE
() YOUR SIGNATURE () TO BE RETURNED () YOUR COMMENT
() OTHER: _____

INFORMATION SUBMITTED BY:

() FACSIMILE DATE: _____
(x) US MAIL - 1ST CLASS DATE: February 25, 1991
() US MAIL - CERTIFIED DATE: _____
() FEDERAL EXPRESS DATE: _____
OTHER: _____ DATE: _____

| # OF COPIES | DATE | DESCRIPTION | COMMENTS |
|-------------|---------|--------------------------------|----------|
| 1 | 2/25/91 | CUT Job #90-035 Closure Report | |
| | | | |
| | | | |

REMARKS: Enclosed please find your copy of the Closure Report for
9620 Santa Fe Springs Road, Santa Fe Springs, CA. for your file.
Thank you.

BY: William B. Reese

11400 West Olympic Blvd., 2nd Floor, Los Angeles, CA 90064-1507
(213) 445-8868 Fax (213) 445-8800

**Closure Report
Aboveground and Underground Storage Tanks
Sleekcraft Boat Site
9620 Santa Fe Springs Road
Santa Fe Springs, CA
CUT Job #90-035**

**Prepared For:
Maple-Ferris Partnership
10601 Norwalk Boulevard
Santa Fe Springs, CA 90670
Telephone: (213) 944-0102
Facsimile: (213) 944-0658**

**Prepared By:
Clean-Up Technology, Inc.
11400 West Olympic Boulevard
Second Floor
Los Angeles, CA 90064-1507
Telephone: (213) 445-8868
Facsimile: (213) 445-8800**

February 20, 1991

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Maple-Ferris Partnership
9620 Santa Fe Springs Road
Santa Fe Springs, CA 90670
CUT Job #90-035
February 20, 1991

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Closure Report for
Above Ground and Underground Storage Tank Removals
Maple-Ferris Partnership
9620 Santa Fe Springs Road
Santa Fe Springs, CA 90670
CUT Job #90-035
February 20, 1991

1.0 INTRODUCTION

Clean-up Technology, Inc. (CUT), a California Hazardous Waste Contractor was contracted to perform remedial activities at Sleekcraft Boats. The scope of work included sample borings placed around the tank farm area, transport and disposal of the tanks, and backfill of the tank excavation.

This report summarizes the tank removal and remedial activities conducted at Sleekcraft Boats by Clean-up Technology, Inc.

1.1 Background

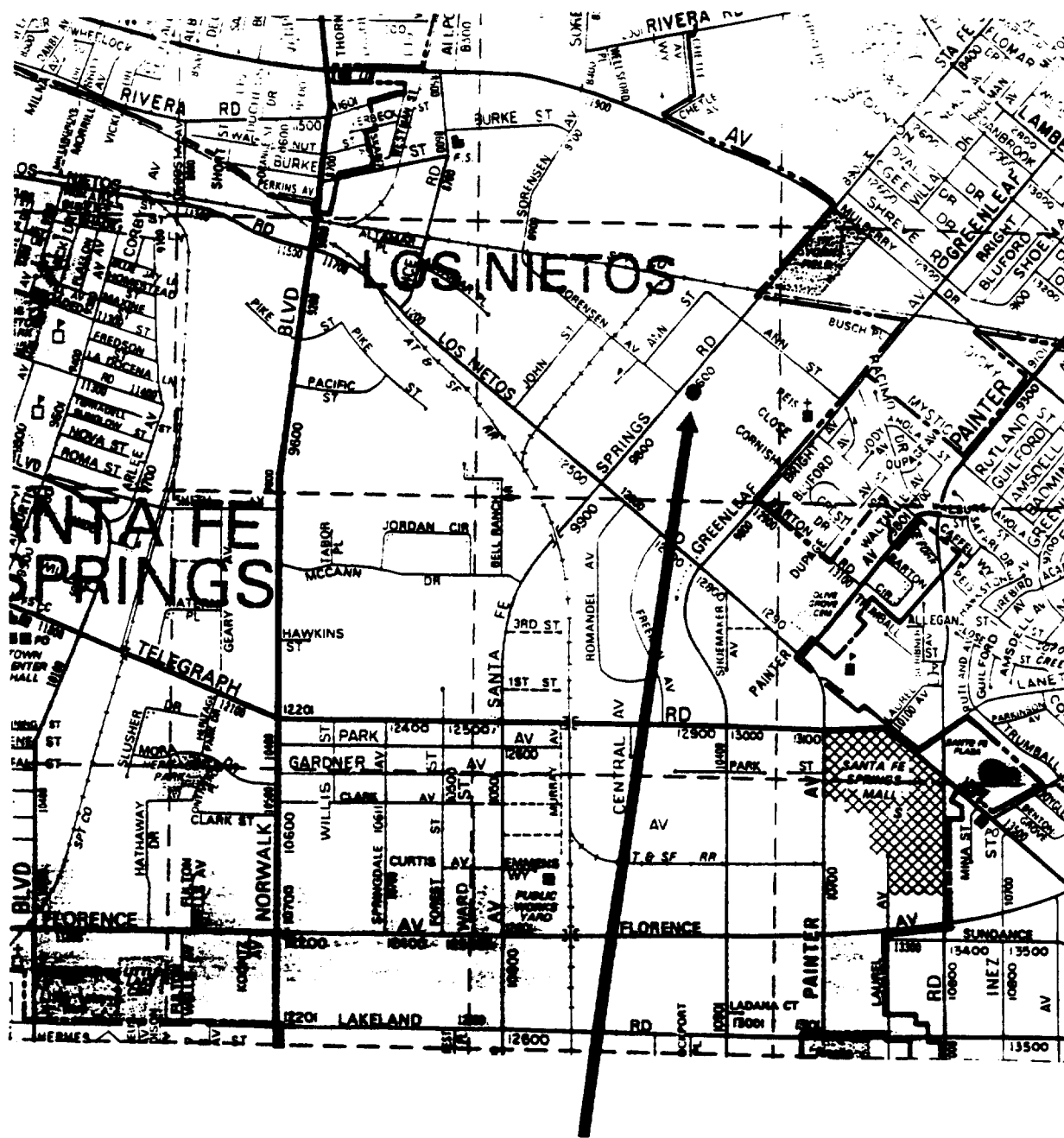
Sleekcraft Boats is located at 9620 Santa Fe Springs Road, Santa Fe Springs, California (refer to Figure 1-site location map). The site is located in an industrial area of Santa Fe Springs.

One 6,000 gallon underground storage tank (UST) was located at the southwest side of the facility. One 5,000 gallon above ground storage tank (AGST) was located at the rear of the facility. The installation dates of the tanks are unknown. The UST was used to store acetone. The AGST was used to store a fiberglass resin (see Appendix F).

2.0 SITE ACTIVITIES

2.1 Sample Boring

One slant sample boring was performed around the UST perimeter, to a depth of 40 feet (see Figure 2, sample boring and tank locations map, and Appendix B, Boring Logs).

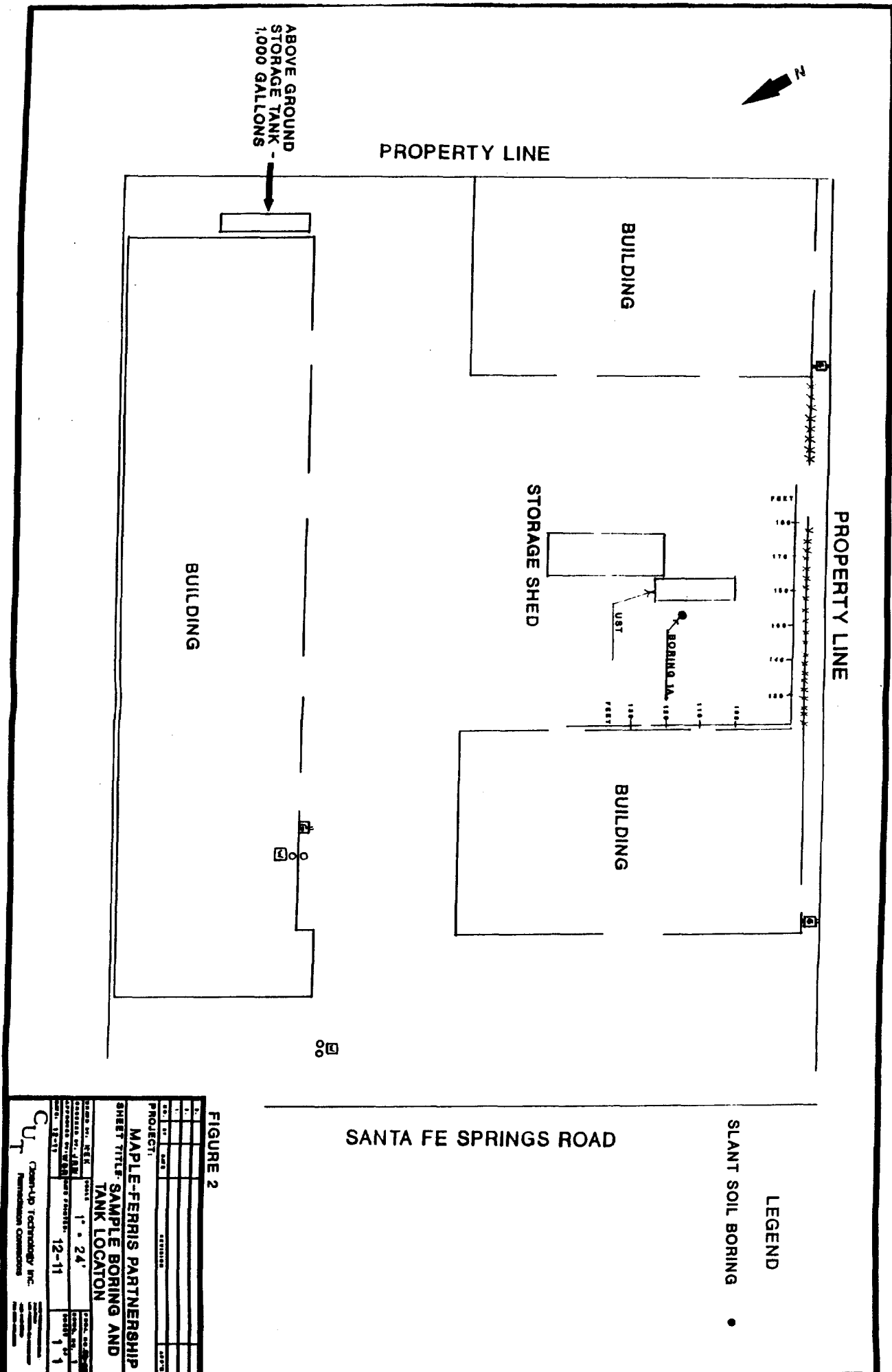


SITE LOCATION



FIGURE 1

| | | | | |
|---|---------------------|---|----------|--------|
| NO. | BY | DATE | REVISION | APP'D. |
| | | | | |
| PROJECT: MAPLE-FERRIS PARTNERSHIP | | | | |
| SHEET TITLE: SITE LOCATION | | | | |
| DESIGN BY: K.E.K. | SCALE: N/A | DRAWN BY: J.R.W. | | |
| CHECKED BY: J.R.W. | DATE PRINTED: 12-27 | SHEET NO. 1 OF 1 | | |
| APPROVED BY: J.R.W. | DATE: 12-27 | | | |
| CUT | | Clean-Up Technology Inc. Remediation Contractors | | |



SANTA FE SPRINGS ROAD

LEGEND
• SLANT SOIL BORING

FIGURE 2

| | | | |
|--------------|-------|---------------------------------|----------|
| PROJECT: | | MAPLE-FERRIS PARTNERSHIP | |
| SHEET TITLE: | | SAMPLE BORING AND TANK LOCATION | |
| DATE: | 12-11 | SCALE: | 1" = 24' |
| BY: | 12-11 | CHECKED BY: | 12-11 |
| DRAWN BY: | | NEK | |
| CHECKED BY: | | JAB | |
| APPROVED BY: | | WAB | |
| DATE: | | 12-11 | |
| CUT | | Clean-Up Technology Inc. | |
| | | Remediation Operations | |

In slant Boring 1A samples were taken at five foot intervals to twenty feet, one at thirty feet, and one at 40 feet. Groundwater was not encountered.

The samples from the slant soil borings were analyzed for EPA Method 8015 Modified, Nonhalogenated Volatile Organics plus Acetone by a California state certified laboratory. Analytical results of the boring samples are summarized in Table 1 and sampling protocol is noted in Appendix C.

2.2 Above Ground Storage Tank Removal

The interior of the tank was measured for lower explosive limit, (LEL) to be sure that safe levels were present before loading and transporting. The tank was loaded onto a flatbed truck to be transported as Hazardous under manifest (see Appendix D) to Erickson, Inc. in Fontana, California for destruction (see Appendix E). The fiberglass resin solids in the tank were removed from the tank at Erickson, Inc. and placed in 55 gallon drums to be disposed of as hazardous under proper manifest (see Appendix K).

All piping associated with the AGST was cut and placed in a secure roll-off bin to be profiled for disposal. Upon completion of profiling, client requested CUT to coordinate disposal. CUT scheduled January 8, 1991 to dispose of the metal pipe imbued with fiberglass resin. On the morning of January 8 1991, CUT employee Robert Pearl noted all metal pipe missing from the site. The missing pipe was reported to the owner, John Maple by CUT employee Mark Hamilton on the morning of January 8, 1991. Mr. Maple indicated that he had no knowledge of any authorized action to remove the metal pipe.

2.3 Underground Storage Tank Removal

Upon completion of the borings, analytical results were submitted to the Department of Public Works (DPW) which reviewed the analytical results, authorized CUT to proceed with the tank removal. Soil overburden was removed, and the tank was triple-rinsed. The rinseate from the tank was disposed of under manifest (Appendix L). The tank was loaded and hauled as non-hazardous (Appendix D) to American Metal Recycling, Inc. in Ontario, CA for destruction (Appendix E).

Two samples were obtained from beneath the tank (Figure 3). Proper sampling protocol was followed (Appendix C.). The results of the analytical results obtained (Appendix F) are summarized in Table 2.

John Maple
N. 11th St.
Row. 77 Bin 5010
Eastman
others.

Appendix 10 - 2nd
CUT, Resin, 100
A CUT, Notified by July.
Tank Dumped 108
Bin 5010

Table One
Sample Boring Analytical Results
9620 Santa Fe Springs Road
Santa Fe Springs, California
CUT Job #90-035

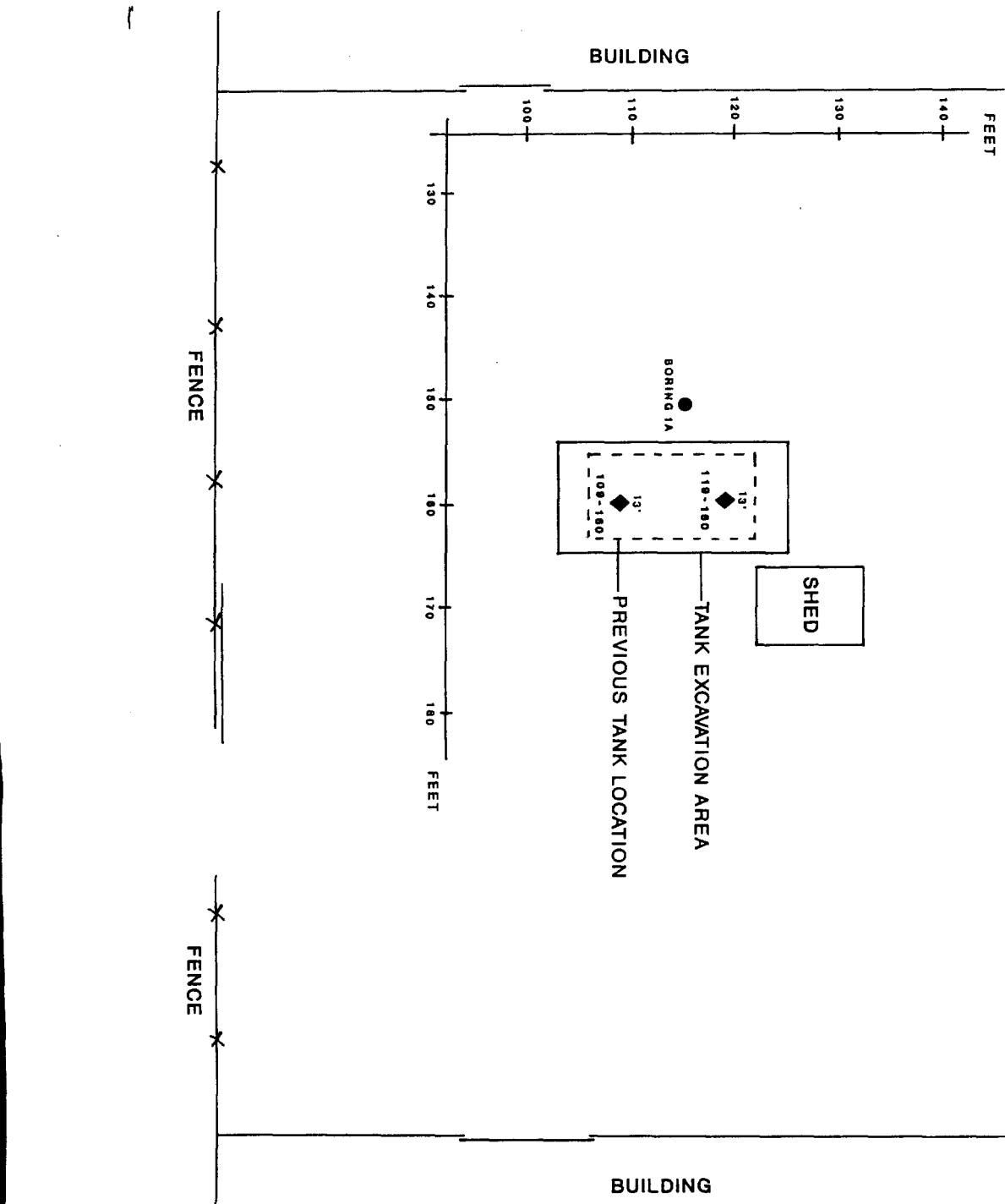
| Boring 1A | | 8015M | |
|------------|---------------------|-------------------|--------------------|
| Sample # | Gasoline (mg/kg) | Diesel (mg/kg) | Acetone (mg/kg) |
| 115-155-5 | ND <1 | ND <1 | ND <.5 |
| 115-157-10 | ND <1 | ND <1 | ND <.5 |
| 115-159-15 | ND <1 | ND <1 | ND <.5 |
| 115-161-20 | ND <1 | ND <1 | ND <.5 |
| 115-165-30 | ND <1 | ND <1 | ND <.5 |
| 115-169-40 | ND <1 | ND <1 | ND <.5 |

ND = Non-Detected

Table Two
Tank Bottom Analytical Results
9620 Santa Fe Springs Road
Santa Fe Springs, California
CUT Project #90-035

| 8015M | | | |
|------------|---------------------|-------------------|--------------------|
| Sample # | Gasoline (mg/kg) | Diesel (mg/kg) | Acetone (mg/kg) |
| 109-160-13 | ND <1 | ND <1 | ND <.5 |
| 119-160-13 | ND <1 | ND <1 | ND <.5 |

ND = Non-Detected



- LEGEND**
- DEPTH OF SAMPLE 10'
 - TANK BOTTOM
 - SAMPLE LOCATION
 - SAMPLE NUMBER 109-180
 - BORING LOCATION

| | |
|---|------------------------|
| FIGURE 3 | |
| PROJECT: MAPLE-FERRIS PARTNERSHIP | |
| SHEET TITLE: TANK BOTTOM SAMPLE LOCATION | |
| DATE: 12-28-90 | SCALE: 1" = 10' |
| DESIGNED BY: JNV | CHECKED BY: JNV |
| DATE: 12-28-90 | DATE: 12-28-90 |
| PROJECT NO.: 80-036 | DATE: 12-28-90 |
| PROJECT NO.: 80-036 | DATE: 12-28-90 |
| PROJECT NO.: 80-036 | DATE: 12-28-90 |

CUT (Jean-Luc) Technology Inc.
Remediation Contractors

2.4 Backfill and Compaction

Backfill of the excavation was monitored by a soils engineer. Approximately 100 cubic yards of crushed miscellaneous base was imported to fill the tank excavation. Compaction tests were performed at a minimum of 2 foot intervals (Appendix H).

3.0 CONCLUSIONS AND RECOMMENDATIONS

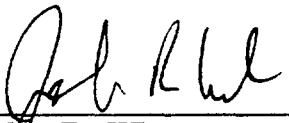
A slant boring was performed to 40 feet with samples taken every five feet beneath the UST. Upon UST removal two additional separate samples were taken beneath the tank. All samples showed no detection by US EPA Method 8015 Modified.


Closure requires sampling and testing soil beneath the tank. The sampling and testing indicate closure should be allowed.

4.0 ACKNOWLEDGEMENT

This report has been prepared under the direction of William B. Reese, a California Registered Geologist, Number 4475. It is in accordance with accepted practices and procedures within the State of California.

Submitted by:



John R. White
Operations Manager

William B. Reese, R.G., R.E.A.
President, Clean-up Technology, Inc.

APPENDIX A
TANK CLOSURE PERMITTING

APPLICATION FOR CLOSURE
HAZARDOUS MATERIALS UNDERGROUND STORAGE
COUNTY OF LOS ANGELES-DEPARTMENT OF PUBLIC WORKS
WASTE MANAGEMENT DIVISION
900 S. FREMONT AVENUE
ALHAMBRA, CALIFORNIA 91803-13310

| | |
|--------|---|
| Permit | 7738 |
| File | 15653 R/C 1H |
| Fee | \$ 141- |
| Check | <input checked="" type="checkbox"/> Cash <input type="checkbox"/> |

OWNER: Name Maple - Ferris Partnership Phone (213) 698-944-0102
Mailing Address 10601 Norwalk Blvd City Santa Fe Springs State CA Zip 90670

FACILITY:

Occupant Name Sleekcraft Phone (213) 698-0928
Site Address 9620 Santa Fe Springs Road City Santa Fe Springs Zip 90670
Mailing Address 9620 Santa Fe Springs Road City Santa Fe Springs State CA Zip 90670
Contact Person John Chatworth Title Superior

CONTRACTOR ☒, complete below: OWNER/OPERATOR AS CONTRACTOR ☐
Name CLEAN-UP TECHNOLOGY, INC. Phone (213) 445-8868
State License No. 58942A Class A- GEN. ENGINEERING CONTRACT

CLOSURE REQUESTED:

- ☒ PERMANENT, TANK REMOVAL (See Conditions A and C Attached)
How many underground tanks will remain after this closure? 0
☐ PERMANENT, CLOSURE IN PLACE (See Conditions A and D Attached)
☐ TEMPORARY (See Conditions A and B Attached)

| TANK DESCRIPTION | | PLOT PLAN ATTACHED <input checked="" type="checkbox"/> | | EXISTING HMUSP NO. <u>5963</u> |
|------------------|-----------------------|--|----------------|---------------------------------|
| Tank No. | Construction Material | Age (Years) | Capacity (gal) | Materials Stored (Past/Present) |
| | STEEL | UNK. | 1,000 | ACETONE |

COMPLETE THE FOLLOWING:

| | YES | NO |
|---|--------------------------|-------------------------------------|
| Has an unauthorized release ever occurred at this site? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Have structural repairs ever been made to these tanks? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Will new underground tanks be installed after closure? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Will any wells, including monitoring wells, be abandoned? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

NOTICE: CONTAMINATED TANKS AND RESIDUES THAT MAY BE LEFT IN TANKS TO BE CLOSED MAY BE A HAZARDOUS WASTE WHICH MUST BE TRANSPORTED AND DISPOSED OF PURSUANT TO CHAPTER 6.5, CALIFORNIA HEALTH & SAFETY CODE. FAILURE TO COMPLY MAY BE PROSECUTED AS A FELONY VIOLATION.

By signature below the applicant certifies that all statements and disclosures above are true and correct and that they have read and agree to abide by this permit and all conditions and limitations attached.

Applicant's Signature W. B. Reese Date 12-12-90
(Print Name) WILLIAM B. REESE Phone (213) 445-8868
Owner ☐ Operator ☐ Contractor ☒

===== TO BE COMPLETED BY THE DEPARTMENT OF PUBLIC WORKS =====
PURSUANT TO SECTION 11.80.070B, LOS ANGELES COUNTY CODE, PERMISSION IS HEREBY GRANTED TO PROCEED WITH THE CLOSURE DESCRIBED ABOVE SUBJECT TO THE ATTACHED CONDITIONS AND LIMITATIONS ☐. THIS PERMIT EXPIRES 180 DAYS FROM THE DATE BELOW.

T.A. TIDEMANSON
Director of Public Works

By

Date

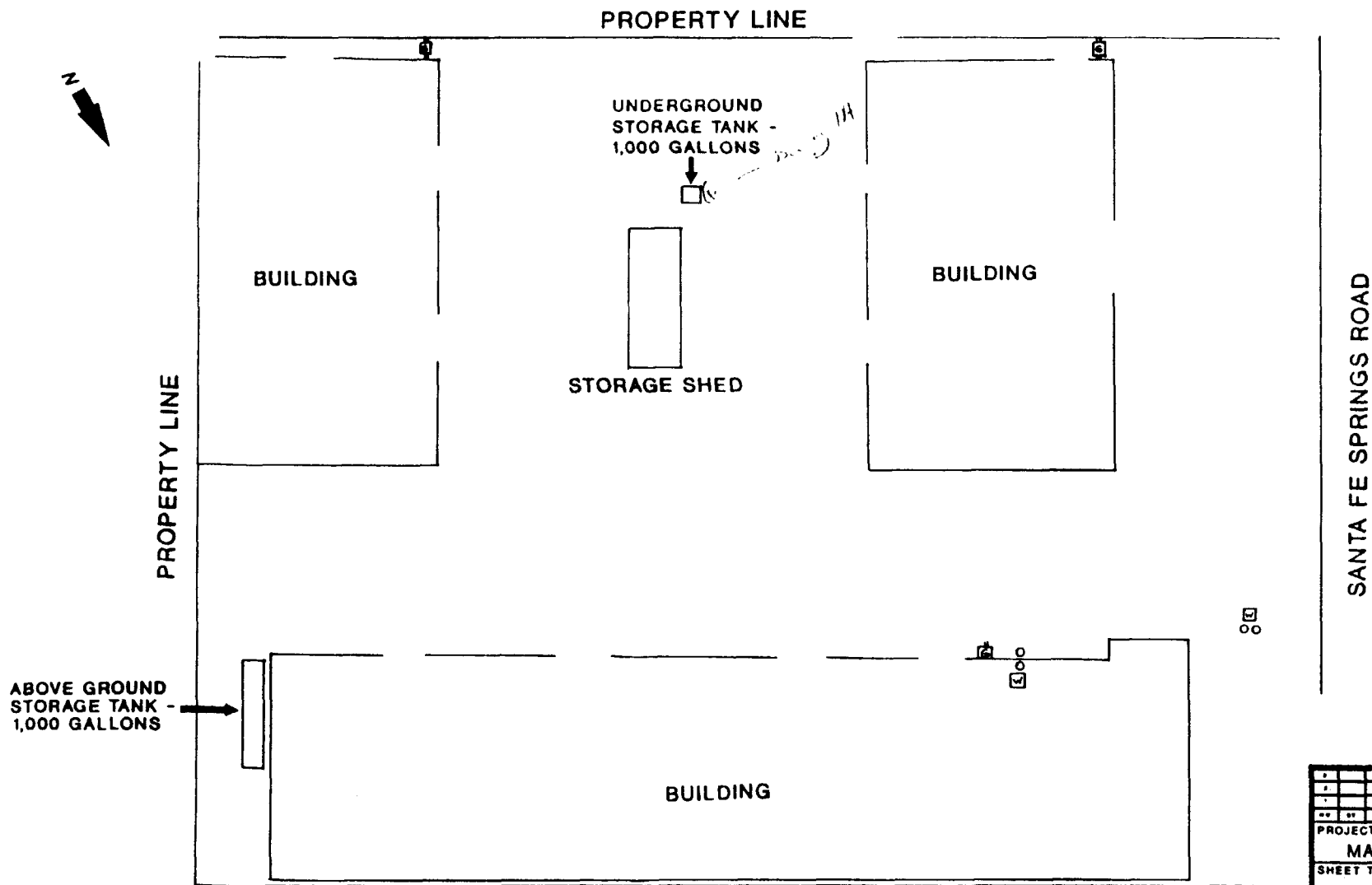
12-12-90

Closure Permit
No.: 7735 B
File No.
I- 15453-14

To satisfy the permanent closure requirements for underground storage tanks previously storing hazardous materials, site integrity must be demonstrated by the analysis of soil samples and, if applicable, groundwater samples as outlined below. These requirements are in addition to the conditions listed on the Application for Closure or contained in an approved Closure Plan.

- [illegible]

3. All soil samples obtained shall be discrete, undisturbed and unexposed prior to analysis. The method used to obtain the samples and the date of sampling shall be included in the final report.
4. If groundwater is encountered during sampling, a groundwater monitoring well shall be established at the most downgradient sampling point. The well shall be developed by removing a minimum of four well volumes and a groundwater sample shall be obtained and analyzed.
5. The analytical results for all soil samples shall be expressed milligrams per kilogram (mg/kg), or micrograms per kilogram (ug/kg) as appropriate. Practical quantitation limits of 5-10 ug/kg (ppb) for volatile organics and 1 mg/kg (ppm) for the petroleum hydrocarbons must be achieved by the laboratory. Analytical results for groundwater samples shall be expressed in ug/l (ppb) and practical quantitation limits of .5-5 ug/l (ppb) for volatile organics, and 1 mg/l (ppm) for petroleum hydrocarbons must be achieved by the laboratory.
6. Analytical results shall be reported on laboratory letterhead and shall include the following information: a) The date the analysis was conducted; b) The method of extraction (if applicable); c) Detection limits for each analytical procedure and determination; d) The method of analysis; e) Signature of chemist certifying results.
7. All soil/groundwater samples obtained shall be handled and transported to laboratory in strict accordance with applicable EPA regulations utilizing chain-of-custody procedures. Chain-of-custody documentation shall be included in the final report.
8. If the soil/groundwater analysis indicates undefined contamination at the facility, additional sampling shall be required to define the vertical and lateral extent present.
9. A final report that contains all of the above required information shall be submitted to the office above within one (1) month from the sampling date or 180 days from the date of this permit, whichever is earlier.



| | | | | |
|--------------------------|---------------------|---|-------------|--------|
| NO. | DATE | BY | DESCRIPTION | APP'D. |
| 1 | | | | |
| PROJECT: | | | | |
| MAPLE-FERRIS PARTNERSHIP | | | | |
| SHEET TITLE: | | | | |
| PLOT PLAN | | | | |
| DRAWN BY: RER | SCALE: 1" = 24' | PAGE NO. 1 | | |
| CHECKED BY: JAW | DATE PRINTED: 12-11 | SHEET OF 1 | | |
| APPROVED BY: WGB | DATE: 12-11 | | | |
| CUT | | Clean-Up Technology Inc. Remediation Contractors | | |

SUE K. CRAFT BOATS
 9620 SANTA FE SPRINGS ROAD
 SANTA FE SPRINGS, CA 90670

DEPARTMENT OF PUBLIC WORKS
CLOSURE PERMIT
SOIL SAMPLING REQUIREMENTS FOR TANK REMOVALS
VOLATILE, SEMI-VOLATILE AND EXTREMELY HAZARDOUS MATERIALS

These requirements are in addition to those specified on the Closure Permit or supplemental forms.

Site integrity shall be demonstrated as indicated below prior to tank removals where the tank presently or previously contained either 1) a volatile or semi-volatile priority pollutant as defined by the Federal Register, Vol. 44 No. 233, December 3, 1979 (Revised 1981), or 2) any material which, as a waste, would be considered an extremely hazardous waste as defined by Title 22, California Administrative Code, Section 66680.

It is the owners/operators responsibility to insure tanks are not excavated until site integrity has been determined and that all applicable safety measures are taken to protect all personnel at the removal site from exposure to hazardous materials. Owners/operators shall demonstrate site integrity as follows:

1. Test borings shall be slant drilled to intercept a point beneath the center of the tank, if possible. If slant drilling is not feasible, the test borings may be drilled vertically and the reason stated in the closure report.
2. For single tanks, a minimum of two test borings will be required, each located on opposite sides of both the major and the minor axes of the tank. The borings shall be as close as practicable to the tank.
3. For multiple tanks, as a minimum, borings shall be placed at 20 foot intervals around the tank cluster. The actual number and location of borings shall be evaluated on a case-by-case basis. Tanks separated by 20 feet or more shall be considered single tanks for the purposes of boring location and placement.
4. Samples shall be obtained under the direct supervision of a California Certified Engineering Geologist, California Registered Geologist or California Registered Civil Engineer with sufficient experience in soils.
5. Soil samples shall be obtained at depths of 5, 10, 20, 30 and 40 feet below grade level.
6. A Shelby Tube or a Modified California Sampler shall be utilized for obtaining all soil samples.
7. Soil samples shall be capped immediately with teflon or aluminum.
8. Soil samples shall not be extruded in the field but are to be immediately placed in a refrigerated ice chest and transported to a State certified laboratory for analysis, using suitable methods.
9. If groundwater is encountered during sampling, a groundwater monitoring well shall be established at the most downgradient sampling point. The well shall be properly developed and a groundwater sample shall be obtained and analyzed.

Owners/operators can also demonstrate site integrity in the field using an organic vapor analyzer for head space analysis of soil samples obtained at boring and sampling locations and depths specified above. Alternative field demonstration methods may be acceptable if approved by this Department in advance. Field demonstrations shall not obviate the requirement for laboratory analysis.

Either the laboratory analytical results of soil/groundwater samples or the field demonstration results must be available to tank removal field personnel and this Department's inspector at the time the tank is removed.

Owners/operators must report the detection of an unauthorized release to this Department within 24 hours. If contamination is inadvertently found during excavation, backfill immediately and report the finding to this Department within 24 hours. If contamination is indicated by laboratory analysis or found in the field, a site characterization will be required.

CONDITIONS A -- CLOSURE

1. Closures shall be carried out such that all applicable regulations from the following agencies are complied with: Los Angeles County, Department of County Engineer-Facilities; Los Angeles County Fire Department, Fire Prevention Division or the appropriate City Fire Department; South Coast Air Quality Management District; and Los Angeles County Department of Health Services.
2. The County Engineer and Fire Department shall be notified in advance of any closure in accordance with the following:
 - a. Removal of tank shall require a three (3) business day advance notification.
 - b. Permanent closure of a tank in place or a temporary closure shall require a 30 day written notification.
3. The fee is \$100 for the first tank plus .038 for each additional tank.
4. All abandoned wells shall be destroyed in such a way that they will not produce water or oil as a channel for interchange of water, when such interchange may result in deterioration of the quality of water in any or all water bearing formations penetrated, or present a hazard to the safety and well-being of people and animals.
5. A well destruction permit issued by the Los Angeles Department of Health Services shall be required for all wells requiring a permit for their initial construction.
6. Well destruction shall be accomplished according to methods described in the latest "Water Well Standards" State of California by the Department of Water Resources, contained in Publication 70-81, December 1981, or any other methods that will provide equivalent or better protection.
7. Plans for the dewatering of a facility shall be submitted to the County Engineer for approval no later than 30 days before the commencement of such operations. Other agencies having jurisdiction shall also be notified. These agencies include the California Regional Water Quality Board, the Los Angeles County Department of Health Services, and the South Coast Air Quality Management District.
8. Dewatering shall require the following, as a minimum:
 - a. Cleaning operation shall be done under the supervision of persons who understand the hazardous potential of the original liquid stored and its components.
 - b. The personnel shall be suitably trained to safely carry out such operation.
 - c. Contaminated materials removed from such facility shall be disposed of at legal point of discharge.
 - d. The operation shall be carried out in a manner that will not endanger the health of the public and the environment.

CONDITIONS B -- TEMPORARY

1. All temporary closures shall be carried out as indicated in Los Angeles County Fire Department, Fire Prevention Division, Supplement 7A -- Inspection Guide 46, "Abandonment or Removal of Underground Tanks," Part 3 and any other applicable Parts.
2. A temporary closure shall not exceed 90 days.

CONDITIONS C -- REMOVAL, TANK(S) REMOVAL

1. All tank removals shall be carried out as indicated in Los Angeles County Fire Department, Fire Prevention Division, Supplement 7A -- Inspection Guide 46, Part 4 and any other applicable Parts.
2. Owner/operator shall notify the Building Department having jurisdiction at the place of removal if a grading permit is necessary.
3. Removed tanks shall not be transported away from the site until an inspection to establish site integrity is carried by the County Engineer.
4. If an applicant has been arranged with a County Engineer Inspector to inspect the removal of a tank, the inspector will only wait at the site a reasonable amount of time (approximately one hour) after arriving for the removal to commence. Another closure fee may be charged if the inspector has to return to the site.
5. After inspection, tanks shall be transported to a legal disposal point.
6. If the tank had stored materials other than motor fuel, fuel oil, or waste oil, site integrity shall be demonstrated using the soil sampling and analysis procedures described in CONDITIONS D below.
7. The site shall be backfilled and recompacted to a relative compaction of 90%.

CONDITIONS D -- REMOVAL, TANK(S) IN PLACE

1. All permanent closures of tanks in place shall comply with Los Angeles County Fire Department, Fire Prevention Division, Supplement 7A -- Inspection Guide 46, Parts B or C, and any other applicable Parts.
2. Owner/operator shall demonstrate post site integrity as follows:
 - a. Test borings shall be placed drilled to intersect a point beneath the center of the tank, if possible. If airtight drilling is not feasible, the test borings may be drilled vertically and the reason stated in the report in 3.b. below.
 - b. For single tanks, a minimum of two test borings will be required, each located on opposite sides of the tank along the major axis of the tank.
 - c. For multiple tanks, as a minimum, borings shall be placed at 20 feet intervals around the tank cluster. The actual number and location of borings shall be evaluated on a case-by-case basis. Tanks separated by 20 feet or more shall be considered single tanks for the purposes of test location and placement.
 - d. Soil samples shall be taken at depths of 5, 10, 20, 30 and 40 feet below grade level.
 - e. A Shelby Tube or a Modified California Sampler shall be utilized for taking all soil samples.
 - f. Soil samples shall be capped immediately with teflon or aluminum.
 - g. Soil samples shall not be extruded in the field but are to be immediately placed in a refrigerated ice chest and transported to a state accredited laboratory for analysis, using suitable methods.
 - h. A report containing the results of the above analysis shall be submitted to the County Engineer.
3. If the soil analysis in 2. above indicates the presence of contaminants, the County Engineer shall require a site investigation as described in Chapter V of the County's "Underground Storage of Hazardous Materials -- Guidelines."
4. A report shall be submitted to the County Engineer containing the results of the site investigation.

NOTICE TO CLOSURE PERMIT APPLICANTS

The South Coast Air Quality Management District (SCAQMD) has adopted Rule 1166 regulating emissions of Volatile Organic Compounds (VOC) from decontamination of soil effective August 6, 1988.

In addition to the requirements of your Closure Permit, persons excavating any underground storage tank that previously contained VOC's must:

- Notify the SCAQMD Executive Officer by telephone at (818) 572-6195, 24 hours prior to tank excavation.
1166(c)(1)(A)
- Monitor the excavated material during the excavation for VOC contamination. 1166(c)(1)(B)
- When VOC contamination is detected:
 - * Cease excavation
 - * Cover the contaminated soil until implementation of approved mitigation measures. 1166(c)(1)(C)
 - * Notify the SCAQMD Executive Officer at (818) 572-6195 within 24 hours of detection of VOC contaminated soil. 1166(c)(2)(A)
- A person shall not engage in or allow any on-site or off-site spreading of VOC contaminated soil which results in uncontrolled evaporation of VOC to the atmosphere.
1166(c)(3)

Exemptions

- Treatment of less than one (1) cubic yard of contaminated soil. 1166(d)(1)(A)
- Decontamination of soil containing organic compounds that have initial boiling point of 302°F or greater, Reid Vapor Pressure less than 80mm Hg or Absolute Vapor Pressure less than 36mm Hg at 20°C. 1166(d)(1)(B),(F)
- Removal of soil for sampling purposes pursuant to EPA methods. 1166(d)(1)(C)
- Accidental spillage of five (5) gallons or less of VOC.
1166(d)(1)(D)
- Decontamination of soil which is contaminated through natural seepage of VOC from oil and gas wells or other natural sources. 1166(d)(1)(E)

SPECIFIC QUESTIONS ON RULE 1166 SHOULD BE REFERRED TO THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (818) 572-6200

ATTENTION CONTRACTOR

NOTIFICATION REQUIREMENTS

Pursuant to Los Angeles County Code, Section 11.78.045, and the Conditions and Limitations of the attached Hazardous Materials Underground Storage Closure Permit, you are required to complete ALL of the agency notifications indicated below within the time period specified prior to commencement of work on this closure.

- [X] 72 HOURS - DEPARTMENT OF PUBLIC WORKS WASTE CONTROL ENGINEERING INSPECTORS:

Unless otherwise noted DPW inspectors are available at the following offices between 8:00 a.m. and 9:30 a.m. ONLY.

- [X] BELLFLOWER DISTRICT - (213) 804-2584; 804-2585
16600 Civic Center Drive, Bellflower, CA 90607
- [] CENTINELA VALLEY REGION - (213) 534-4862; 534-4859
24320 South Narbonne Avenue, Lomita, CA 90717
- [] LENNOX DISTRICT - (213) 419-5650
4353 Lennox Boulevard, Lennox, CA 90304
- [] SAN GABRIEL VALLEY DISTRICT - (818) 574-0962
125 South Baldwin Avenue, Arcadia, CA 91006
- [] EAST LOS ANGELES DISTRICT - (213) 260-3466; 260-3467
5141 East Pomona Boulevard, Los Angeles, CA 90022
- [] SAN DIMAS REGION - (818) 339-6281; (714) 599-1286
201 East Bonita Avenue, San Dimas, CA 91773
- [] NEWHALL REGION - (805) 253-7207
23757 West Valencia Boulevard, Santa Clarita, CA 91355

- [X] 24 HOURS (OR AS REQUIRED) - LOCAL FIRE DEPARTMENT FIRE PREVENTION INSPECTOR:

- [X] City of San Fernando
- [] Los Angeles County Fire Department

- [X] 24 HOURS - SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT

(818) 572-6195

FAILURE TO PROVIDE NOTICE AS REQUIRED ABOVE MAY RESULT IN PERMIT REVOCATION, ADDITIONAL SITE ASSESSMENT REQUIREMENTS AND/OR ADMINISTRATIVE PENALTIES AS PROVIDED BY LAW.

CLOSENOTE
08/90

1d4/ATTENT

**LOS ANGELES COUNTY
DEPARTMENT OF PUBLIC WORKS
CLOSURE REPORT REQUIREMENTS**

A closure report shall be submitted to the Los Angeles County Department of Public Works, Waste Management Division, P.O. Box 1460, Alhambra, CA 91802-1460, containing:

1. File number of facility and closure permit number.
2. Plot plan to scale showing locations of tanks, sampling points, buildings, adjacent streets and north arrow.
3. Description of methods for obtaining, handling, and transporting samples.
4. Time and date samples were obtained.
5. If borings were established, boring logs certified by a CA Registered Geologist, CA Certified Engineering Geologist, or CA Registered Civil Engineer with sufficient experience in soils.
6. Chain-of-custody documentation initiated by person obtaining sample through person at State Department of Health Services certified laboratory.
7. Disposal destination of tanks and evidence of legal disposal.
8. Analysis results by a State certified laboratory submitted on laboratory letterhead showing analysis date, methods of extraction and methods of analysis.
9. Documentation as to depth of groundwater at facility.
10. Manifests to document hazardous waste disposal of any removed soil and tank rinsate.
11. Any observations of site contamination.
12. Remedial action plan to mitigate contamination.
13. Report to be signed by CA Registered Geologist, CA Certified Engineering Geologist, or CA Registered Civil Engineer with sufficient experience in soils.

Signature

W. Neese

Date

12/12/90



CITY OF SANTA FE SPRINGS
FIRE DEPARTMENT
FIRE ENVIRONMENTAL PROTECTION BUREAU
 11300 GREENSTONE AVE., SANTA FE SPRINGS, CA 90670
 (213) 944-9713

PLAN REVIEW/FIELD INSPECTION/SPECIAL ACTIVITIES APPLICATION

Name of Facility SLEEK CRAFT BOATS
 Project Address 9620 SANTA FE SPRINGS ROAD
 Architect/Engineer 2 telephone _____
 Address _____
 Contractor CLEAN-UP TECHNOLOGY telephone (213) 445-8868
 Address 11400 W. OLYMPIC BLVD. LA 90064
 LICENSED CONTRACTOR DECLARATION:
 I hereby affirm that I am licensed under provisions of Charter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.
 License Class A- GEN. ENGRG. CON. License No. 589424
 Signature [Signature] Date 12-12-90

| TYPE OF CONSTRUCTION CIRCLE ONE | | | |
|--|----------|------------|--------|
| NEW | ADD | ALTERATION | REPAIR |
| CONVERSION | DEMOLISH | OTHER | |
| DESCRIPTION OF WORK | | | |
| removal of A/G tank ~ 1000 gals. 1/2 A/G tank 1,000 gals | | | |

OWNER BUILDER DECLARATION
 I hereby certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

Signature _____ Date _____ City License _____

| (✓) | DESCRIPTION | FEE | (✓) | DESCRIPTION | FEE |
|--|---|-----|--|--|--------|
| PLAN REVIEW AND FIELD INSPECTIONS | | | | On-site Fire Hydrant System | |
| | Preliminary Plan Review | | | Drying Ovens | |
| | Fire Alarm Systems | | | High-Piled Combustible Stock (Racks/Draft Curtains/Hose Racks/Smoke Vents) | |
| | Fire Extinguishing System | | | Tents and Air Support Structure | |
| FIRE SPRINKLER SYSTEMS | | | | Mechanical Refrigeration System | |
| | a. Up to 20,000 sq. ft. per floor | | | Flow Coating Equipment | |
| | b. 20,001 to 50,000 sq. ft. per floor | | | Tenant Improvements (Structural) | |
| | c. 50,001 to 100,000 sq. ft. per floor | | | Tenant Improvements (Auto. Sprinklers) | |
| | d. More than 100,000 sq. ft. per floor | | | Soil Venting Systems | |
| | Flammable/Combustible Liquid Room | | | Gas Detection System | |
| | Compressed Gas System | | | Sprinkler System (20 heads or less) | |
| | Flammable/Combustible Liquid Tank (U/G & A/G) | | SPECIAL ACTIVITIES AND EVENTS -- ONE TIME PERMITS | | |
| | L.P.G. Tanks | | | Hydrant Flow Request | |
| | Paint Spray Booths | | | A/G TANK REMOVAL | |
| | Dip Tank | | X | a. First Tank | 200.00 |
| | Dust Collection System | | | b. Each Additional Tank | 100.- |
| | Standpipes (Wet/Dry) | | | Abandonment/Reabandonment of Oil Wells (Including Capping) | |
| NEW CONSTRUCTION PLAN REVIEW | | | | Monitoring Wells | |
| | a. Up to 20,000 sq. ft. per floor | | | Standby Fire Watch | |
| | b. 20,001 to 50,000 sq. ft. per floor | | | Fire Department Equipment With Crew | |
| | c. 50,001 to 100,000 sq. ft. per floor | | | Request Inspection | |
| | d. More than 100,000 sq. ft. per floor | | | Risk Management Prevention Program (RMPP) 4 hour minimum | |
| | Other | | | Other | |

MAKE CHECKS PAYABLE TO THE CITY OF SANTA FE SPRINGS

TOTAL DUE

INSPECTOR

DATE

12/19/90

\$ 300.-
 SB



POST ON JOB SITE

SAFETY GEAR IS PROTECTION. WE'VE GOT TO HAVE IT BEFORE THE JOB IS EVEN CALLED IN CASE OF AN EMERGENCY.

REMARKS: 10-12-1968 120000

POST THIS CARD AT JOB SITE

CITY OF SANTA FE SPRINGS
DIVISION OF BUILDING & SAFETY
11710 N. TORAY ROAD
SANTA FE SPRINGS, CA. 90670
(213) 868-0511, EXT. 241

INSPECTION RECORD

PERMITS WILL BE VOIDED IF WORK IS
STOPPED FOR 180 CONSECUTIVE DAYS

8394 12-13-90 demo

BLDG. PERMIT NO. 9620 S.F.S. Rd. DATE 12-13-90 GROUP Tank
ADDRESS Maple Ferris Partner
OWNER

NOTE: Do Not Cover Walls Until Frame, Insulation, Electrical,
Mechanical and Plumbing Have Been Signed.

| BUILDING | | DATE | INSPECTOR'S SIGNATURE |
|--|--|------|-----------------------|
| FOUNDATION: LOCATION FORMS, SETBACK | | | |
| SLAB | | | |
| Pour No Concrete Until Above Has Been Signed | | | |
| FRAME: FIRE STOPS, BRACING, BOLTS | | | |
| INSULATION | | | |
| LATH. INT. <input type="checkbox"/> | | | |
| DRYWALL <input type="checkbox"/> | | | |
| LATH. EXT. | | | |
| | | | |
| | | | |

| ELECTRICAL | | DATE | INSPECTOR'S SIGNATURE |
|-----------------|--|------|-----------------------|
| UNDER SLAB WORK | | | |
| ROUGH CONDUIT | | | |
| ROUGH WIRING | | | |
| TEMP. POWER | | | |
| | | | |

| MECHANICAL | | DATE | INSPECTOR'S SIGNATURE |
|--------------------------------|--|------|-----------------------|
| FAU A.C. REF | | | |
| BOILER OTHER | | | |
| COMBUST. & CIRCULAT. | | | |
| AIR, DUCTS, VENTS, ETC. | | | |
| LOCATION, CLEARANCE, ACCESS | | | |
| | | | |

| PLUMBING | | DATE | INSPECTOR'S SIGNATURE |
|---|--|------|-----------------------|
| UNDER SLAB WORK | | | |
| ROUGH PLUMBING | | | |
| ROUGH GAS PIPING | | | |
| HOUSE SEWER | | | |
| SEPTIC TANK, SEEP PIT(S) AND/OR DRAINFIELD | | | |
| | | | |

| FINAL APPROVALS | | DATE | INSPECTOR'S SIGNATURE |
|-------------------|--|------|-----------------------|
| ELECTRICAL | | | |
| GAS PIPING | | | |
| MECHANICAL | | | |
| PLUMBING FIXTURES | | | |
| BUILDING | | | |

CITY OF SANTA FE SPRINGS
BUSINESS OPERATION TAX CERTIFICATE

The person, firm or corporation below named is hereby granted this certificate for the purpose of engaging in, carrying on or conducting, in the City of Santa Fe Springs, California, the business, trade, calling, profession, exhibition or occupation described in the application for this certificate; for the period indicated, as provided by Ordinance No. 397.

Donald M. Nuttall
Donald M. Nuttall - Finance Director

BUSINESS ADDRESS IF DIFFERENT FROM MAILING ADDRESS

MAILING ADDRESS

CLEAN-UP TECHNOLOGY INC
11400 W OLYMPIC BLVD # 2nd Floor
LOS ANGELES CA 90064

tax code 07

RETAIN THIS COPY FOR YOUR RECORDS

TAX COMPUTATION SECTION

SEE REVERSE SIDE OF THIS FORM FOR DEFINITIONS AND EXPLANATIONS

| |
|---------------------------------|
| NEW EXPIRATION DATE |
| 12/13/91 |
| CERTIFICATE NUMBER |
| CLEA-114000000 |
| BUSINESS TELEPHONE |
| 213-445-8868 |
| FEDERAL I.D. # OR S.S. # |
| 93-1022066 |

OWNERS SIGNATURE

DATE

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND ABILITY.

PLEASE SUBMIT NOTIFICATION AND PAYMENT TO

CITY OF SANTA FE SPRINGS
P.O. BOX 2120
SANTA FE SPRINGS, CA 90670-3658
(213) 868-0511

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. 1192871-20 Company State Farm

☐ Certified copy is hereby furnished.

☒ Certified copy is filed with the county building inspection department.

Date 12-1-90 Applicant K. K. K.

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number 584124 Lic. Class A - General

Contractor C.U.T. Date 3-2-90

☐ I am exempt under Sec. _____

B.&P.C. for this reason _____

Date: _____

Signature _____

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code.)

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code.)

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent

Date

| FOR APPLICANT TO FILL IN | | | |
|---|---------------|--------------------------------------|--|
| BUILDING ADDRESS <u>12001 Santa Fe Springs Rd</u> | | | |
| CITY <u>Santa Fe Springs</u> | | ZIP <u>90670</u> | |
| SIZE OF LOT | | NO. OF BLDGS. NOW ON LOT <u>3</u> | |
| TRACT | BLOCK | LOT NO. | |
| ASSESSOR MAP BOOK | PAGE | PARCEL | |
| OWNER <u>Maya-Ferris Partners</u> | | TEL. NO. <u>544-0102</u> | |
| ADDRESS <u>10601 Norwalk Blvd.</u> | | | |
| CITY <u>Santa Fe Springs</u> | | ZIP <u>90670</u> | |
| ARCHITECT OR ENGINEER | | TEL. NO. | |
| ADDRESS | | | |
| CONTRACTOR <u>C.U.T. Technology</u> | | TEL. NO. <u>443-8868</u> | |
| ADDRESS <u>11400 Olympic Blvd</u> | | LIC. NO. <u>584124</u> | |
| CITY <u>L.A.</u> | | LIC. CLASS <u>A - General</u> | |
| SQ. FT. SIZE | NO. OF STORES | NO. OF FAMILIES | |
| DESCRIPTION OF WORK <u>REMOVE LAND FILL</u> <u>TANK - 1100 GALLONS</u> | | | |
| USE OF EXISTING BLDG. | | | |
| APPLICANT (PRINT) <u>K. K. K.</u> | | TEL. NO. <u>443-8868</u> | |
| ADDRESS <u>11400 Olympic Blvd - 2nd Floor</u> | | | |
| <p>WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE A HAZARDOUS MATERIAL OR A MIXTURE CONTAINING A HAZARDOUS MATERIAL EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIALS INFORMATION GUIDE?</p> <p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> | | | |
| <p>WILL THE INTENDED USE OF THE BUILDING BY THE APPLICANT OR FUTURE BUILDING OCCUPANT REQUIRE A PERMIT FOR CONSTRUCTION OR MODIFICATION FROM THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (SCAQMD) SEE PERMITTING CHECKLIST FOR GUIDELINES.</p> <p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> | | | |
| <p>I HAVE READ THE HAZARDOUS MATERIALS INFORMATION GUIDE AND THE SCAQMD PERMITTING CHECKLIST. I UNDERSTAND MY REQUIREMENTS UNDER THE LOS ANGELES COUNTY CODE, TITLE 2, CHAPTER 2.20 SECTIONS 2.20.100 THROUGH 2.20.140 CONCERNING HAZARDOUS MATERIALS REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.</p> | | | |
| OWNER OR AGENT | | | |
| P.C. FEE | | PERMIT FEE <u>75.00</u> | |
| | | ISSUANCE FEE <u>12.00</u> | |
| INVESTIGATION FEE | | TOTAL FEE <u>88.00</u> | |

| | | | | |
|--|---------------------------|-------------------------------|------------------------------|----------------------------|
| BUILDING ADDRESS <u>12001 Santa Fe Springs Rd</u> | | | | |
| LOCALITY <u>Santa Fe Springs</u> | | | | |
| NEAREST CROSS ST. | | | | |
| USE ZONE <u>111</u> | MAP NO. <u>12-17-7</u> | | | |
| SPECIAL CONDITIONS | | | | |
| WITHIN 1000 FT. OF SCHOOL? | | | YES | NO |
| DISTRICT <u>4</u> | GROUP <u>1</u> | TYPE CONST. <u>General</u> | FIRE ZONE <u>3</u> | PROCESSED BY <u>111</u> |
| STATISTICAL CLASSIFICATION CLASS NO. <u>3</u> DWELL UNITS | | | APT | CONDO |
| REQUIRED SET BACK | YARD | HWY | TOTAL SETBACK FROM PROP LINE | EXIST WIDTH |
| FRONT P.L. | | | | |
| SIDE P.L. | | | | |
| SEWER MAP BK. PG. | | | | |
| VALUATION <u>\$ 88,000</u> | | | | |
| LDMA P/C # | | | | |
| LDMA Perm # | | | | |
| FINAL DATE | | | | |
| FINAL BY | | | | |

VALIDATION

23244
100001
1008800
00088003
1213-90

SEE REVERSE FOR EXPLANATORY LANGUAGE



P.O. BOX 807, SAN FRANCISCO, CA 94101-0807

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

DECEMBER 13, 1990

POLICY NUMBER: 1192879 - 90
CERTIFICATE EXPIRES: 6-1-91

┌
CITY OF SANTA FE SPRINGS
DEPT OF BUILDING & SAFETY
11710 TELEGRAPH RD.
SANTA FE SPRINGS
CA, 90607

L

This is to certify that we have issued a valid Workers' Compensation insurance policy in a form approved by the California Insurance Commissioner to the employer named below for the policy period indicated.

This policy is not subject to cancellation by the Fund except upon ten days' advance written notice to the employer.

We will also give you TEN days' advance notice should this policy be cancelled prior to its normal expiration.

This certificate of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.


PRESIDENT

EMPLOYER

┌
CLEAN-UP TECHNOLOGY INC.
11400 W. OLYMPIC BLVD. 2ND FL.
LOS ANGELES
CA 90064

L

ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

12/13/90

PRODUCER

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

JARDINE INSURANCE BROKERS, INC.
12397 LEWIS STREET, SUITE 101
GARDEN GROVE, CA 92640
CODE 714)740-1127 SUB-CODE

INSURED

CLEAN UP TECHNOLOGY, INC.
11400 W. OLYMPIC BOULEVARD
LOS ANGELES, CA 900

COMPANIES AFFORDING COVERAGE

COMPANY LETTER A NATIONAL UNION FIRE INSURANCE COMPANY
COMPANY LETTER B
COMPANY LETTER C
COMPANY LETTER D
COMPANY LETTER E

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| CO LTR | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | ALL LIMITS IN THOUSANDS |
|--------|------------------------------|---------------|----------------------------------|-----------------------------------|---|
| A | GENERAL LIABILITY | | | | GENERAL AGGREGATE \$ 2,000, |
| X | COMMERCIAL GENERAL LIABILITY | G:C, 8019818 | 5/19/90 | 5/19/91 | PRODUCTS-COMP/OPS AGGREGATE \$ 2,000, |
| X | CLAIMS MADE OCCUR. | | | | PERSONAL & ADVERTISING INJURY \$ 1,000, |
| | OWNER'S & CONTRACTOR'S PROT. | | | | EACH OCCURRENCE \$ 1,000, |
| | | | | | FIRE DAMAGE (Any one fire) \$ 50, |
| | | | | | MEDICAL EXPENSE (Any one person) \$ 5, |
| | UTOMOBILE LIABILITY | | | | COMBINED SINGLE LIMIT \$ |
| | ANY AUTO | | | | BODILY INJURY (Per person) \$ |
| | ALL OWNED AUTOS | | | | BODILY INJURY (Per accident) \$ |
| | SCHEDULED AUTOS | | | | PROPERTY DAMAGE \$ |
| | HIRED AUTOS | | | | |
| | NON-OWNED AUTOS | | | | |
| | GARAGE LIABILITY | | | | |
| | EXCESS LIABILITY | | | | EACH OCCURRENCE \$ |
| | OTHER THAN UMBRELLA FORM | | | | AGGREGATE \$ |
| | WORKER'S COMPENSATION | | | | STATUTORY \$ |
| | AND | | | | (EACH ACCIDENT) \$ |
| | EMPLOYERS' LIABILITY | | | | (DISEASE-POLICY LIMIT) \$ |
| | OTHER | | | | (DISEASE-EACH EMPLOYEE) \$ |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS

CERTIFICATE HOLDER

CITY OF SANTA FE SPRINGS

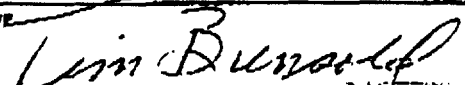
ATTN: BUILDING DEPARTMENT

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

TIM BUNSOLD



APPENDIX B
BORING LOGS

CUT

11400 West Olympic Blvd
2nd Floor
Los Angeles, CA 90064-1507(213) 445-8868
Fax (213) 445-8800

Clean-Up Technology Inc.

START/COMPLETION DATE

12-14-90/12-14-90

ELEVATION DATUM

Page 1 of 1

BORING DEPTH (ft) 40'

WELL DEPTH (ft)

WATER

INITIAL

COMPLETION

124 HRS

DRILLING EQUIPMENT

CME - 75

LOGGED/CHECKED BY:

John White

DRILLING COMPANY/DRILLER

ABC LIOVIN - JIM

WELL SCREEN DEPTH (ft) BY:

BACKFILL MATERIALS/SEA

BENTONITE PLUG

NO. & TYPE
OF SAMPLE:

UNDISTURBED

MOD. C.

DISTURBED

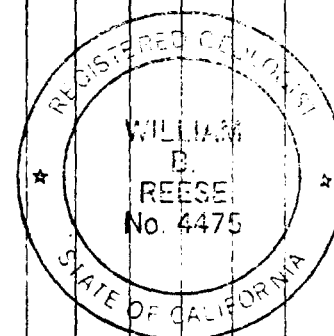
| Time | Depth (ft) | Description/Comments | USCS | Graphic | Well | Sample | | Analytical Data | | | | |
|------|------------|--|------|---------|------|------------|------|-----------------|------------|---|---|-----|
| | | | | | | Number | Type | OWN (ppm) | Laboratory | | | |
| | | | | | | | | B | T | Y | E | ITP |
| 8:00 | 5 | - Grey/granular material some clay | | | | 115-155-5 | 62 | | | | | |
| 8:15 | 10 | - Red Clay - Slightly sandy | | | | 115-157-10 | 0 | | | | | |
| 8:35 | 15 | - Light Brown Clay | | | | 115-159-15 | 0 | | | | | |
| 8:40 | 20 | - Light Brown Clay | | | | 115-161-20 | 0 | | | | | |
| 8:55 | 25 | - Sand | | | | | | | | | | |
| 9:03 | 30 | - Brown Fine Grained Sand | | | | 115-165-30 | 0 | | | | | |
| 9:05 | 35 | - Medium Grained sand/cobblestone | | | | | | | | | | |
| 9:19 | 40 | - Medium Grained sand | | | | 115-169-40 | 0 | | | | | |
| | | Boring completed to 40 feet; Ground water not encountered | | | | | | | | | | |

REGISTERED GEOPHYSICIST

WILLIAM D. REESE

No. 4475

STATE OF CALIFORNIA

PROJECT
Maple - Ferris PartnershipPROJECT NO.
90-035LOG OF BORING
IA

FIGURE

APPENDIX C
SAMPLING PROTOCOL

Sampling Methodology

Brass Tube

1. The sampler wore latex gloves to insure the integrity of the sample.
2. The 6" X 2" brass sample tube and sample tube casing are washed in a water and trisodium phosphate solution prior to and in between each sample taken.
3. A slide hammer with the sample tube casing attached is driven into the soil at the point of sampling to obtain the sample.
4. The 6" X 2" brass sample tube is removed from the sample tube casing.
5. Teflon tape and plastic caps are put on the ends of the 6" X 2" brass sample tube.
6. The sample is labeled and the proper Chain-of-Custody (see Appendix G) is filled out.
7. The sample is placed in an ice chest and cooled to approximately 4°C.
8. The sample is then shipped to a California State Certified Laboratory for the specified analysis, accompanied by the proper Chain-of-Custody.

Note: Latex gloves are changed between each sample taken.

APPENDIX D
TANK TRANSPORT MANIFEST

#31248

See Instructions on Back of Page 6
and Front of Page 7

Department of Health
Toxic Substances Control Div.
Sacramento, Calif

90113226

IN CASE OF AN EMERGENCY OR SPILL CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR
TRANSPORTER
FACILITY

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. | |
|--|--|---|-----------------------|---|---|------------------|
| 3. Generator's Name and Mailing Address MAPLE - FERRIS PARTNERSHIP 10601 NORWALK BLVD. SANTA FE SPRINGS, CA 90670 | | 4. Generator's Phone (213) 944-0102 | | A. State Manifest Document Number 90113226 | | |
| 5. Transporter 1 Company Name NIETO AND SONS TRUCKING | | 6. US EPA ID Number CAT080016116 | | B. State Generator's ID HYHQ36-037990 | | |
| 7. Transporter 2 Company Name | | 8. US EPA ID Number | | C. State Transporter's ID 114021 | | |
| 9. Designated Facility Name and Site Address ERICKSON, INC. 13738 SLOVER AVENUE FONTANA, CA 92335 | | 10. US EPA ID Number CAD98248493B | | D. Transporter's Phone 714-990-6855 | | |
| | | | | E. State Transporter's ID | | |
| | | | | F. Transporter's Phone | | |
| | | | | G. State Facility's ID CAD982484933 | | |
| | | | | H. Facility's Phone 714-355-5601 | | |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | 12. Containers No. | 13. Total Quantity | 14. Unit Wt/Vol | 1. Waste No. | |
| a. WASTE EMPTY STORAGE TANKS | | | | | State 512 | |
| NON RCRA HAZARDOUS WASTE SOLID | | 0101 | TP | 08000 | P | EPA/Other EXEMPT |
| b. | | | | | | State |
| | | | | | | EPA/Other |
| c. | | | | | | State |
| | | | | | | EPA/Other |
| d. | | | | | | State |
| | | | | | | EPA/Other |
| J. Additional Descriptions for Materials Listed Above | | K. Handling Codes for Wastes Listed Above | | | | |
| EMPTY (contents) One TANK, (size) 7500 GAL | | a. 01 | | b. | | |
| EMPTY (contents) TANK, (size) GAL | | c. | | d. | | |
| EMPTY (contents) TANK, (size) GAL | | | | | | |
| EMPTY (contents) TANK, (size) GAL | | | | | | |
| 15. Special Handling Instructions and Additional Information Contained fiberglass resin | | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | | |
| Printed/Typed Name X JOHN MAPLE | | Signature | | Month Day Year 11/22/90 | | |
| 17. Transporter 1 Acknowledgement of Receipt of Materials | | Signature | | Month Day Year 11/22/90 | | |
| Printed/Typed Name STEPHEN P. NIETO | | Signature | | Month Day Year 11/22/90 | | |
| 18. Transporter 2 Acknowledgement of Receipt of Materials | | Signature | | Month Day Year | | |
| Printed/Typed Name | | Signature | | Month Day Year | | |
| 19. Discrepancy Indication Space | | | | | | |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. | | | | | | |
| Printed/Typed Name MICHAEL WALSH | | Signature | | Month Day Year 11/22/90 | | |

APPENDIX E
TANK DESTRUCTION CERTIFICATION

JRW/WBR:dp90-035A



2202 South Milliken Avenue
Ontario, CA 91761
(714) 988-8000

No. 36053

TANK DISPOSAL FORM

Date: 1-8, 19 91
Job #
P.O. #

CONTRACTOR: ERICKSON, Inc.
ADDRESS: 13738 Slover Ave, Fontana, CA 92335
JOB SITE: ERICKSON
ADDRESS: 13738 Slover Ave, Fontana, CA
DESTINATION: A.M.R. 2202 S. Milliken Ave., Ontario, CA 91761

| DATE | TIME | PROJECTED TANKS | ORDERED BY: | LIC NO |
|------|------|-----------------|-------------|--------|
|------|------|-----------------|-------------|--------|

| SPECIAL INSTRUCTIONS: | TIME IN: | 31248/704 |
|-----------------------|----------|-----------|
| | TIME OUT | |

| ✓ | Services Rendered | Cost |
|---|---------------------------------------|--------|
| — | Disposal Fee | 200.00 |
| — | Extensive Loading Time | 150.00 |
| — | Disposal Fee with Permit | 300.00 |
| — | Fiberglass Tank Disposal Fee Per Tank | 400.00 |
| — | Fiberglass Tank Delivered | 200.00 |
| — | Bobtail Disposal Fee | 250.00 |
| — | Cancellation Fee | 250.00 |

TOTAL CHARGES \$ 0

All fees incurred are per load unless specified.
Terms are net 30 days from date of invoice.
Contractor's signature represents acceptance
of terms for payment, and confirms that tank
removal complies with State laws.

CONTRACTOR'S SIGNATURE

| TANKS RECEIVED | | | | TOTAL |
|----------------|--------------|-------------------------------------|----------|-------|
| QTY | GALLONS | TYPE F* S* | NET TONS | |
| | 200 | <input type="checkbox"/> | .14 | |
| | 500 | <input type="checkbox"/> | .21 | |
| | 650 | <input type="checkbox"/> | .24 | |
| | 1000 | <input type="checkbox"/> | .44 | |
| | 1000 - 6 ft. | <input type="checkbox"/> | .61 | |
| | 1500 | <input type="checkbox"/> | .87 | |
| | 2000 | <input type="checkbox"/> | .97 | |
| | 2500 | <input type="checkbox"/> | 1.14 | |
| | 3000 | <input type="checkbox"/> | 1.32 | |
| | 4000 | <input type="checkbox"/> | 1.84 | |
| | 5000 | <input type="checkbox"/> | 2.42 | |
| | 6000 | <input type="checkbox"/> | 2.84 | |
| | 7500 | <input checked="" type="checkbox"/> | 3.26 | |
| | 8000 | <input type="checkbox"/> | 3.44 | |
| | 8000 | <input type="checkbox"/> | 3.82 | |
| | 10000 | <input type="checkbox"/> | 4.33 | |
| | 12000 | <input type="checkbox"/> | 4.93 | |

| NO. OF TANKS | TOTAL | NET TONS |
|-------------------------------------|-------|----------|
| <u>1</u> | | <u>0</u> |
| *F — FIBERGLASS *S — STEEL 105 | | |

CERTIFICATE OF TANK DISPOSAL / DESTRUCTION
THIS IS TO CERTIFY THE RECEIPT AND ACCEPTANCE OF THE TANK(S) AS SPECIFIED ABOVE. ALL MATERIALS SPECIFIED
HAVE BEEN COMPLETELY DESTROYED FOR SCRAP PURPOSES ONLY.

Cheryl Loria
AUTHORIZED REP.

January 8, 1991
DATE

CONTRACTOR COPY

No. LA- 704 31248

Clean-Up Technology

CERTIFICATE
Certified Services Company
13738 Stover Avenue
Fontana, California 92335

Day or Night
Telephone
(714) 355-5601

For: Erickson, Inc. Tank No.(s.) 704 Location: Fontana, CA Date: 1/4/91 Time: 9:30 AM
Test Method: Visual/Gastech 1314 SMPN Last Product: Risen

This is to certify that I have personally determined that the tank(s) in the following list are in accordance with the American Petroleum Institute and have found the condition of each to be in accordance with its assigned designation. This certificate is based on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

| Tank(s) | Condition |
|---------------------------------|----------------------------|
| One (1) 7,500 gallon steel tank | Safe for Fire: < 1% LEL |
| | Safe for Men: 20.9% Oxygen |
| | Hydrocarbon: < 10 PPM |

Remarks:

In the event of any physical or atmospheric changes affecting the gas-free condition of the above tanks, or if in any doubt immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

Standard Safety Designation:

Safe for Men: Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

Safe for Fire: Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 per cent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration than permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under which it was issued.

Brian Alexander SUPERVISOR
Representative Title

Michael J. Galt
Inspector

ERICKSON, INC.
TANK CERTIFICATION

CUSTOMER Clean-Up Technology, Inc.

GENERATOR Maple - Ferris Partnership

IS SITE 9620 Santa Fe Springs Rd
LOCATION Santa Fe Springs, CA

EPA I.D. # CAC 000547952

HAZ. WASTE TAX # HYHQ 36-037900

MANIFEST # 90113226

1. TANK # - 704
CAPACITY - 7500
DIAMETER - 6'
LENGTH - 39'
STEEL/
GLASS - Stainless steel
LAST
CONTAINED- Fiberglass Resin
(SEE TABLE A)

TABLE A: LG-LEADED GAS, UG-UNLEADED GAS, D-DIESEL, WO-WASTE OIL,
FO-FUEL OIL, SPECIFY MATERIAL LAST CONTAINED IF OTHER.

** I hereby declare that the tank(s) listed above are fully and accurately described, and that the tank(s) have been numbered to correspond with the information provided above.

CUSTOMER SIGNATURE [Signature]

DATE 12-20-90

3. TANK PROCESSING: JOB # _____
REC'VD - _____
CLEANED - _____
G.F.CERT - _____
OFF SITE - _____
DEST. - _____
WASTE
SOLIDS - _____
WASTE
RINSATE - _____
WASTE
OIL - _____

ERICKSON SUPERVISOR SIGNATURE _____

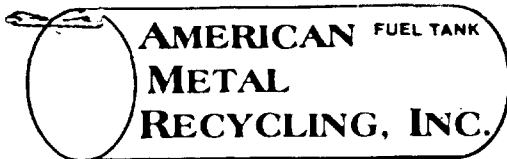
DATE _____

For assistance in completing this form call Jim Dippell (714) 355-5601

7/10/90

CERT. FORM: ON _____ NOT ON _____, SEE REVISED COPY

OFF LOADED BY _____ DATE _____



2202 South Milliken Avenue
Ontario, CA 91761
(714) 988-8000

No. **35978**

TANK DISPOSAL FORM

Date: 12 20, 19 90
Job # _____
P. O. # _____

CONTRACTOR: CLEANUP TECH. CO. NICHOLSON
ADDRESS: P.O. Box 8111 ANAHEIM, CALIF.
JOB SITE: FLEET PLANT
ADDRESS: 9020 SANTA LE SUAS RD, SANTA LE SUAS, CA
DESTINATION: A.M.R. 2202 S. Milliken Ave., Ontario, CA 91761

| DATE | TIME | PROJECTED TANKS | ORDERED BY | LIC NO | | | |
|---|-------|---|-------------------------------------|---------------|--|----------|-------|
| SPECIAL INSTRUCTIONS: _____ _____ | | | TIME IN: | | | | |
| | | | TIME OUT: | | | | |
| | | | TANKS RECEIVED | | | | |
| | | | QTY | GALLONS | TYPE F* S* | NET TONS | TOTAL |
| | | | _____ | 280 | <input type="checkbox"/> <input type="checkbox"/> | .14 | |
| | | | _____ | 500 | <input type="checkbox"/> <input type="checkbox"/> | .21 | |
| | | | _____ | 550 | <input type="checkbox"/> <input type="checkbox"/> | .24 | |
| | | | _____ | 1000 - 12 ft. | <input type="checkbox"/> <input type="checkbox"/> | .44 | |
| | | | _____ | 1000 - 6 ft. | <input type="checkbox"/> <input type="checkbox"/> | .61 | |
| | | | _____ | 1500 | <input type="checkbox"/> <input type="checkbox"/> | .87 | |
| | | | _____ | 2000 | <input type="checkbox"/> <input type="checkbox"/> | .97 | |
| | | | _____ | 2500 | <input type="checkbox"/> <input type="checkbox"/> | 1.14 | |
| | | | _____ | 3000 | <input type="checkbox"/> <input type="checkbox"/> | 1.32 | |
| | | | _____ | 4000 | <input type="checkbox"/> <input type="checkbox"/> | 1.64 | |
| | | | _____ | 5000 | <input type="checkbox"/> <input type="checkbox"/> | 2.42 | |
| | | | _____ | 6000 | <input checked="" type="checkbox"/> <input type="checkbox"/> | 2.64 | |
| | | | _____ | 7500 | <input type="checkbox"/> <input type="checkbox"/> | 3.26 | |
| _____ | 8000 | <input type="checkbox"/> <input type="checkbox"/> | 3.44 | | | | |
| _____ | 9000 | <input type="checkbox"/> <input type="checkbox"/> | 3.82 | | | | |
| _____ | 10000 | <input type="checkbox"/> <input type="checkbox"/> | 4.33 | | | | |
| _____ | 12000 | <input type="checkbox"/> <input type="checkbox"/> | 4.93 | | | | |
| All fees incurred are per load unless specified Terms are net 30 days from date of invoice. Contractor's signature represents acceptance of terms for payment, and confirms that tank removal complies with State laws. | | | NO. OF TANKS | TOTAL | NET TONS | | |
| | | | _____ | _____ | <u>2.54</u> | | |
| CONTRACTOR'S SIGNATURE _____ | | | *F — FIBERGLASS *S — STEEL 105 | | | | |

CERTIFICATE OF TANK DISPOSAL / DESTRUCTION
THIS IS TO CERTIFY THE RECEIPT AND ACCEPTANCE OF THE TANK(S) AS SPECIFIED ABOVE. ALL MATERIALS SPECIFIED
HAVE BEEN COMPLETELY DESTROYED FOR SCRAP PURPOSES ONLY.

[Signature]
AUTHORIZED REP

GENERATOR COPY

12-20-90
DATE

APPENDIX F
ANALYTICAL RESULTS

**SMITH-EMERY COMPANY***The Full Service Independent Testing Laboratory, Established 1904*

781 East Washington Boulevard
P. O. Box 880550, Hunter's Point Shipyard Bldg. 114
5427 East La Palma Avenue

• Los Angeles, California 90021
• San Francisco, California 94188
• Anaheim, California 92807

• (213) 749-3411 • Fax: (213) 746-7228
• (415) 330-3000 • Fax: (415) 822-5864
• (714) 693-1026 • Fax: (714) 693-1034

CLEAN-UP TECHNOLOGIES, INC.
FILE# 71546
11400 W. OLYMPIC BLVD 2ND FLR
LOS ANGELES, CA. 90064-0150

12/18/90

Attn: BILL REESE
213/445/8868

MAPLZ-FERRIS PARTNERSHIP
CHAIN OF CUSTODY

Sample #: 0348113201
Received: 12/14/90
Type: OTHER

Collector: Client
Sampling Date & Time: 12/14/90, 0830
Method: SUBMITTED BY CLIENT

I.D.: 115-155-5

| =====CONSTITUENT===== | ====METHOD===== | ==RESULT== | ====UNIT==== |
|-----------------------|-----------------|------------|--------------|
| EPA 8015 | | * | |
| GASOLINE | EPA 8015 | ND < 1 | MG/KG |
| DIESEL | EPA 8015 | ND < 1 | MG/KG |
| ACETONE | EPA 8015 | ND < 0.5 | MG/KG |

Sample #: 0348113202
Received: 12/14/90
Type: SOIL

Collector: Client
Sampling Date & Time: 12/14/90, 0845
Method: SUBMITTED BY CLIENT

I.D.: 115-157-10

| | | | |
|----------|----------|----------|-------|
| EPA 8015 | | * | |
| GASOLINE | EPA 8015 | ND < 1 | MG/KG |
| DIESEL | EPA 8015 | ND < 1 | MG/KG |
| ACETONE | EPA 8015 | ND < 0.5 | MG/KG |

Sample #: 0348113203
Received: 12/14/90
Type: SOIL

Collector: Client
Sampling Date & Time: 12/14/90, 0856
Method: SUBMITTED BY CLIENT

I.D.: 115-159-15

| | | | |
|----------|----------|--------|-------|
| EPA 8015 | | * | |
| GASOLINE | EPA 8015 | ND < 1 | MG/KG |
| DIESEL | EPA 8015 | ND < 1 | MG/KG |



SMITH-EMERY COMPANY

The Full Service Independent Testing Laboratory, Established 1904

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5427 East La Palma Avenue

• Los Angeles, California 90021
• San Francisco, California 94188
• Anaheim, California 92807

• (213) 749-3411
• (415) 330-3000
• (714) 693-1026

• Fax: (213) 746-7228
• Fax: (415) 822-5864
• Fax: (714) 693-1034

CLEAN-UP TECHNOLOGIES, INC.
FILE# 71546
11400 W. OLYMPIC BLVD 2ND FLR
LOS ANGELES, CA. 90064-0150

12/27/90

Attn: JOHN WHITE
213/445/8868

MAPLE - FERRIS PARTNERSHIP
CHAIN OF CUSTODY

Sample #: 0355065601
Received: 12/21/90
Type: SOLID

Collector: Client
Sampling Date & Time: 12/20/90, 1110
Method: SUBMITTED BY CLIENT

I.D.: 109 - 160 - 13

| =====CONSTITUENT===== | =====METHOD===== | ==RESULT== | ==UNIT== |
|-----------------------|------------------|------------|----------|
| EPA 8015 | | * | |
| GASOLINE | EPA 8015 | ND <1 | MG/KG |
| DIESEL | EPA 8015 | ND <10 | MG/KG |
| ACETONE | EPA 8015 | ND <500 | UG/KG |

Sample #: 0355065602
Received: 12/21/90
Type: SOLID

Collector: Client
Sampling Date & Time: 12/20/90, 1120
Method: SUBMITTED BY CLIENT

I.D.: 119 - 160 - 13

| | | | |
|----------|----------|---------|-------|
| EPA 8015 | | * | |
| GASOLINE | EPA 8015 | ND <1 | MG/KG |
| DIESEL | EPA 8015 | ND <10 | MG/KG |
| ACETONE | EPA 8015 | ND <500 | UG/KG |

Respectfully submitted,


Shahid Noori, Manager Chemical Lab

**SMITH-EMERY COMPANY***The Full Service Independent Testing Laboratory, Established 1904*

781 East Washington Boulevard
P.O. Box 880550, Hunter's Point Shipyard Bldg. 114
5427 East La Palma Avenue

• Los Angeles, California 90021
• San Francisco, California 94188
• Anaheim, California 92807

• (213) 749-3411
• (415) 330-3000
• (714) 693-1026

• Fax: (213) 746-7228
• Fax: (415) 822-5864
• Fax: (714) 693-1034

| =====CONSTITUENT===== | ====METHOD===== | ==RESULT== | ==UNIT== |
|-----------------------|-----------------|------------|----------|
| ACETONE | EPA 8015 | ND < 0.5 | MG/KG |

Sample #: 0348113204
Received: 12/14/90
Type: SOIL

Collector: Client
Sampling Date & Time: 12/14/90, 0907
Method: SUBMITTED BY CLIENT

I.D.: 115-161-20

| | | |
|----------|----------|----------------|
| EPA 8015 | | * |
| GASOLINE | EPA 8015 | ND < 1 MG/KG |
| DIESEL | EPA 8015 | ND < 1 MG/KG |
| ACETONE | EPA 8015 | ND < 0.5 MG/KG |

Sample #: 0348113205
Received: 12/14/90
Type: SOIL

Collector: Client
Sampling Date & Time: 12/14/90, 0919
Method: SUBMITTED BY CLIENT

I.D.: 115-165-30

| | | |
|----------|----------|----------------|
| EPA 8015 | | * |
| GASOLINE | EPA 8015 | ND < 1 MG/KG |
| DIESEL | EPA 8015 | ND < 1 MG/KG |
| ACETONE | EPA 8015 | ND < 0.5 MG/KG |

Sample #: 0348113206
Received: 12/14/90
Type: SOIL

Collector: Client
Sampling Date & Time: 12/14/90, 0926
Method: SUBMITTED BY CLIENT

I.D.: 115-169-40

| | | |
|----------|----------|----------------|
| EPA 8015 | | * |
| GASOLINE | EPA 8015 | ND < 1 MG/KG |
| DIESEL | EPA 8015 | ND < 1 MG/KG |
| ACETONE | EPA 8015 | ND < 0.5 MG/KG |

Respectfully submitted,

Shahid Noori
Shahid Noori, Manager Chemical Lab

Material Safety Data Sheet

Alpha Resins Corporation
19991 Seaton Avenue
Ferris, California 92370

Product: 80.654
Internal ID: marine

MSDS No: ALPHA / CA 033
Revision: 4/89
Date: April 25, 1989

National Paint
and Coatings
Association

Hazardous Material
Identification
System

| | |
|---------------------|---|
| HEALTH HAZARD | 2 |
| FLAMMABILITY HAZARD | 3 |
| REACTIVITY HAZARD | 2 |
| PERSONAL PROTECTION | I |

SECTION I. MATERIAL IDENTIFICATION

Trade/Material Name: 80.654

Description: Diacid/Glycol condensate

CAS: mixture

Trade Secret Register: N/A

Chemical Name: Polyester Resin

Manufacturer: Alpha Resins Corporation

Phone: (714)657-5161

SECTION II. INGREDIENTS AND HAZARDS

| Ingredient Name: | CAS Number: | Percent: | Exposure Limits: |
|------------------|-------------|----------|------------------|
| Styrene | 100-42-5 | 35%* | 50 ppm |

SARA 313 INFORMATION: This product contains the above substance which is subject to the reporting requirements of section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 and 40 CFR Part 372.

* Weight Percent.

SECTION III. PHYSICAL DATA

Appearance & Odor: Viscous Liquid with a Sweet Pungent Odor.

Boiling point: 293°F
Vapor pressure: 4.5 mmHg
Water solubility (%): very slight
Vapor density (air=1): 3.6

Evaporation rate: 3.1
Specific gravity (H₂O=1): 1.0 - 1.1
Melting point: N/A

SECTION IV. FIRE AND EXPLOSION DATA

Flash Point (method): 88-92°F (cc) Limits: LEL %: 1.1 UEL %: 6.1

NFPA Flammable/Combustible Liquid Classification: 1C

NFPA Fire Hazard Symbol Codes: Flammability: 3 Health: 2 Reactivity: 2 Special: none

Extinguishing Media: water fog, dry chemical, foam or CO₂

Material Safety Data Sheet

Alpha Resins Corporation
- 19991 Seaton Avenue
Ferris, California 92370

Product: E0.654
Internal ID: marine

MSDS No: ALPHA / CA 033
Revision: 4/89
Date: April 25, 1989

FIRE AND EXPLOSION DATA continued from page 1

Autoignition Temp:
914°F

Unusual fire or explosion hazards: At elevated temperatures, such as in a fire condition, polymerization may take place resulting in violent rupture of closed containers. Wear positive pressure apparatus, eye protection, and keep vapors away from possible ignition sources.

Special fire-fighting procedures: If electrical equipment is involved, the use of foam should be avoided. Handling equipment should be cooled by water stream if exposed to fire.

SECTION V. REACTIVITY DATA

Material is stable. Hazardous polymerization may occur.

Chemical incompatibilities: Acids, oxidizing agents, free radical initiators such as peroxides, and metallic halides and soaps.

Conditions to avoid: sunlight, open flames, contamination, and prolonged storage above 75°.

Hazardous decomposition Products: carbon monoxide, carbon dioxide, and low molecular weight hydrocarbons.

SECTION VI. HEALTH HAZARD INFORMATION

This product is considered a possible carcinogen by IARC.*

Summary of risks: Causes irritation to throat, eyes, skin and nose. Harmful if inhaled.

Medical conditions which may be aggravated by contact: May aggravate pre-existing respiratory and skin disorders.

Target organs: CNS, respiratory system, lungs, eyes and skin.

Primary entry route(s): inhalation, ingestion, contact

Acute effects: May irritate eyes, nose, throat, and skin.

Chronic effect(s): May cause victim to feel drugged, sleepy or become unconscious. Repeated skin contact may cause rash. May affect the brain or nervous system, causing dizziness, headache or nausea. Reports have associated repeated and prolonged occupational overexposure to solvents with permanent brain and nervous system damage. Intentional misuse by deliberately concentrating and inhaling the contents may be harmful or fatal.

Material Safety Data Sheet

Alpha Resins Corporation
19491 Seaton Avenue
Ferris, California 92370

Product: 80.654
Internal ID: marine

MSDS No: ALPHA / CA 033
Revisions: 4/89
Date: April 25, 1989

HEALTH HAZARD INFORMATION continued from page 2

Signs & symptoms of overexposure:

Eye contact: Causes irritation to the eyes.

Skin contact: May cause irritation to the skin.

Inhalation: May irritate eyes, nose and throat. May feel drugged, sleepy, or unconscious.

Ingestion: May cause victim to become weak and unsteady.

First aid:

Eye contact: Immediately flush with plenty of water for at least 15 minutes. Get prompt medical attention. (Contact lenses should not be worn while working with this material.)

Skin contact: Wash exposed skin with soap and water. Get medical attention if irritation develops. Remove contaminated clothing, shoes, and thoroughly clean before reuse.

Inhalation: Move exposed person(s) to fresh air. Get medical attention.

Ingestion: DO NOT induce vomiting. Call Physician immediately.

*For hazard communication purposes under OSHA Standard 29 CFR Part 1910.1200, styrene is listed as a possible carcinogen by IARC. Neither the data from various long-term animal studies nor from epidemiology of workers exposed to styrene provide an adequate basis to conclude that styrene is carcinogenic.

SECTION VII. SPILL, LEAK AND DISPOSAL PROCEDURES

Spill / Leak procedures: Remove all sources of ignition. Ventilate area. Prevent material from entering drains. Absorbent should be vermiculite, dry sand or earth.

Small Spill - Soak up with absorbent and scoop into drums.

Large Spill - Dike and pump into drums.

Waste management / Disposal: Dispose of according to local, state and federal regulations.

SECTION VIII. SPECIAL PROTECTION INFORMATION

Personal protective equipment:

Goggles: Use chemical goggles.

Gloves: Use gloves of rubber or other resistant material.

Material Safety Data Sheet

Alpha Resins Corporation
1991 Seaton Avenue
Perris, California 92370

Product: 80.654
Internal ID: marine

MSDS No: ALPHA / CA 033
Revision: 4/89
Date: April 25, 1989

SPECIAL PROTECTION INFORMATION continued from page 3

Respirator: Chemical cartridge respirator with NIOSH/OSHA approved organic vapor cartridge to 400 ppm. At exposures above 400 ppm use an SCBA.

Other: Use chemical resistant aprons or coats to avoid skin contact.

Workplace considerations:

Ventilation: Local exhaust is preferred. Mechanical ventilation is acceptable.
Use explosion proof equipment.

Safety stations:

Safety showers and eye wash stations are recommended.

Contaminated equipment:

Clean contaminated equipment with an appropriate solvent prior to storage.

SECTION IX. SPECIAL PRECAUTIONS

Storage segregation: Store in a cool dry place away from incompatible materials.

Special handling / storage: Store in an area below 75°F and out of direct sunlight.
Keep from heat, spark, and smoking areas. Empty containers may be hazardous.

Engineering controls: Equipment should be grounded during transfer and non-sparking pumps should be used.

Other precautions: Do not transfer to unlabeled bottles or containers.

DOT Class: Flammable Liquid

UN Register: UN-1866

Prepared/revised by: John Arnold, Technical Service Manager

April 25, 1989

The Alpha Corporation has made every effort to ensure the accuracy of the foregoing information. No warranties of accuracy are made, however, as to the chemical or physical changes that may occur in the transportation, storage or use of this material after it leaves Alpha's control.

APPENDIX G
CHAIN-OF-CUSTODY

[illegible]

CUT

11400 West Olympic Blvd., 2nd floor, Los Angeles, CA 90064-1507
(213) 445-8868 Fax (213) 445-8800

| CUT | | | | | | | | Clean-Up Technology Inc. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|--|--|--|--|--|--|--|---------------------------------------|--|--|--|--|--|-----------------------------------|--|--|--|--|--|---|--|--|--|--|--|-------------|--|--|--|--|--|--------------------------|--|--|--|--|--|----------------------------|--|
| PROJECT NO. 90-035 | | | | | | | | PROJECT NAME Maple-Ferris Partnership | | | | | | SAMPLERS: (Signature) [Signature] | | | | | | | | | | | | | | | | | | | | | | | | | |
| SAMPLER NUMBER | | | | | | | | DATE | | | | | | TIME | | | | | | SAMPLE DESCRIPTION / REMARKS | | | | | | | | | | | | | | | | | | | |
| 115-153-5 | | | | | | | | 12-14 | | | | | | 8:30 | | | | | | Green - silty sand - granular - slight odor | | | | | | | | | | | | | | | | | | | |
| 115- 153 -10 | | | | | | | | 12-14 | | | | | | 8:45 | | | | | | Red Clay - No odor | | | | | | | | | | | | | | | | | | | |
| 115-159-15 | | | | | | | | 12-14 | | | | | | 8:46 | | | | | | Light Brown Clay | | | | | | | | | | | | | | | | | | | |
| 115-161-20 | | | | | | | | 12-14 | | | | | | 9:07 | | | | | | Light Brown Clay | | | | | | | | | | | | | | | | | | | |
| 115-161-20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 115-165-30 | | | | | | | | 12-14 | | | | | | 9:19 | | | | | | Brown Fine grained sand | | | | | | | | | | | | | | | | | | | |
| 115-169-40 | | | | | | | | 12-14 | | | | | | 9:26 | | | | | | Medium grained sand | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | Turn around Tuesday Noon | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | Need Hand copy by Tuesday | | | | | | | | | | | | | | | | | | | |
| RELINQUISHED BY: (Signature) | | | | | | | | DATE / TIME | | | | | | RECEIVED BY: (Signature) | | | | | | RELINQUISHED BY: (Signature) | | | | | | DATE / TIME | | | | | | RECEIVED BY: (Signature) | | | | | | TOTAL NUMBER OF CONTAINERS | |
| RELINQUISHED BY: (Signature) | | | | | | | | DATE / TIME | | | | | | RECEIVED BY: (Signature) | | | | | | RELINQUISHED BY: (Signature) | | | | | | DATE / TIME | | | | | | RECEIVED BY: (Signature) | | | | | | | |
| RELINQUISHED BY: (Signature) | | | | | | | | DATE / TIME | | | | | | RECEIVED BY: (Signature) | | | | | | RELINQUISHED BY: (Signature) | | | | | | DATE / TIME | | | | | | RECEIVED BY: (Signature) | | | | | | | |
| METHOD OF SHIPMENT: | | | | | | | | SHIPPED BY: (Signature) | | | | | | COURIER: (Signature) | | | | | | RECEIVED FOR LAB BY: (Signature) | | | | | | DATE / TIME | | | | | | | | | | | | | |

APPENDIX H
BACKFILL COMPACTION RESULTS



SMITH-EMERY COMPANY

The Full Service Independent Testing Laboratory, Established 1904

781 East Washington Blvd.
Los Angeles, California 90021
(213) 749-3411
Fax (213) 746-7228

December 31, 1990

Seco File No.: 22381
SECo Report No.: L-90-6713

Clean-Up Technology
11400 West Olympic Blvd. 2nd Floor
Los Angeles, California 90064-1507

RE: Maple Ferris Tank B.F.
9620 Sante Fe Springs Road
Sante Fe Springs, California

SUBJECT: MAXIMUM DENSITY/OPTIMUM MOISTURE DETERMINATION

STANDARD: ASTM D1557 - 78

SOURCE: Sampled by Smith-Emery Company representative on 12-21-90

REPORT OF TEST

In compliance with the request of your authorized representative, we have conducted the subject test, as per project requirements for the above referenced project.

The bulk soil sample was returned to our laboratory by our field soil technician.

Test results are as follows:

| <u>Sample I.D.</u> | <u>Maximum Density, pcf</u> | <u>Optimum Moisture, %</u> |
|---------------------------------|-----------------------------|----------------------------|
| Crushed | 122 | 10.0 |
| Miscellaneous Base (On-Site) | | |

Respectfully submitted,

SMITH - EMERY COMPANY

RAF HUTALLA
RAF HUTALLA
Geotechnical Manager

RH/fw

cc: 2 - Addressee
1 - SECO L.A.

Anaheim

San Francisco

5427 East La Palma Ave.
Anaheim, California 92807
(714) 693-1026
Fax (714) 693-1034

Hunters Point Shipyard, Bldg. 114
P.O. Box 880550
San Francisco, California 94188
(415) 822-8880
Fax (415) 822-5864



SMITH-EMERY COMPANY

The Full Service Independent Testing Laboratory, Established 1904

781 East Washington Blvd.
Los Angeles, California 90021
(213) 749-3411
Fax (213) 746-7228

December 31, 1990

Seco File No.: 22381
SECo Report No.: L-90-6711

Clean-Up Technology
11400 West Olympic Blvd. 2nd Floor
Los Angeles, California 90064-1507

RE: Maple Ferris Tank B. F.
9620 Sante Fe Springs Road
Sante Fe Springs, California

SUBJECT: MAXIMUM DENSITY/OPTIMUM MOISTURE DETERMINATION

STANDARD: ASTM D1557 - 78

SOURCE: Sampled by Smith-Emery Company representative on 12-20-90

REPORT OF TEST

In compliance with the request of your authorized representative, we have conducted the subject test, as per project requirements for the above referenced project.

The bulk soil sample was returned to our laboratory by our field soil technician.

Test results are as follows:

| Sample I.D. | Maximum Density, pcf | Optimum Moisture, % |
|-------------------------------|----------------------|---------------------|
| Fine to Medium Sand (On-Site) | 133 | 8.2 |

Respectfully submitted,

SMITH - EMERY COMPANY

RAF Huttalla
RAF HUTTALLA
Geotechnical Manager

RH/fw

cc: 2 - Addressee
1 - SECo L.A.

Anaheim

San Francisco

5427 East La Palma Ave.
Anaheim, California 92807
(714) 693-1026
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SMITH-EMERY COMPANY

The Full Service Independent Testing Laboratory, Established 1904

781 East Washington Blvd.
Los Angeles, California 90021
(213) 749-3411
Fax (213) 746-7228

January 9, 1991

SECo File No.: 22381
SECo Report No.: G-91-5026

Clean-Up Technology
11400 West Olympic Blvd. 2nd floor
Los Angeles, California 90064-1507

RE: Maple Ferris Partnership
9620 Santa Fe Springs Road
Santa Fe Springs, California

SUBJECT: COMPACTION TESTING

REPORT OF TESTS

In compliance with your request, Smith-Emery Company has conducted standard compaction testing for the above referenced project.

Field density tests to determine relative compaction were conducted in accordance with ASTM D1556-82, sandcone method, ASTM D2922-82, nuclear method, ASTM D2937-83, drive tube.

Test locations and results are presented on the attached Table 1. Maximum density/optimum moisture determinations were performed on representative samples in accordance with ASTM D1557-78, five layer method. Test results are presented on the attached Table 2.

Respectfully submitted,

SMITH - EMERY COMPANY

NOTE:

RAF HUTALLA
RAF HUTALLA
Geotechnical Manager

This report contains a weekly summary of compaction test results only and it should not be submitted to City or County grading departments as a certified compacted earth fill report.

RH/fw
Attachments

- cc: 1 - Addressee
1 - Maple-Ferris Partnership
1 - SECo L.A.

Anaheim

5427 East La Palma Ave.
Anaheim, California 92807
(714) 693-1026
Fax (714) 693-1034

San Francisco

Hunters Point Shipyard, Bldg. 114
P.O. Box 880550
San Francisco, California 94188
(415) 822-8880
Fax (415) 822-5864

SMITH-EMERY COMPANY

January 9, 1991

SECo File No.: 22381
SECo Report No.: G-91-5026

Project: Maple Ferris Tank B.F.
Santa Fe Springs, California

| ELEVATION KEY | | | | | METHOD KEY | | | |
|--|-----------|----------------------|-------------------|----------------------|----------------------|---------------------|---------------|-----------|
| SG-Subgrade | | FSG-Finish Subgrade | | | SC-Sandcone | | | |
| FG-Finish Grade | | FAB-Finish Agg. Base | | | NG-Nuclear Gauge | | | |
| AB-Aggregate Base | | BTM-Bottom | | | DT-Drive Tube | | | |
| RESULTS OF DENSITY TESTS | | | | | | | | |
| Test No.: | Test Date | Test Type | Elev. Depth (ft.) | Moisture Content (%) | Dry Density (p.c.f.) | Relative Compaction | | Soil Type |
| | | | | | | Field (%) | Specified (%) | |
| 1 | 12-20 | DT | -9' FSG | 6.0 | 119.2 | 90 | 90 | 1 |
| LOCATION: TANK BACKFILL STORAGE YARD AT LINE C BETWEEN LINES 1 AND 2 | | | | | | | | |
| 2 | 12-20 | DT | -7' FSG | 7.9 | 120.0 | 90 | 90 | 1 |
| LOCATION: TANK BACKFILL STORAGE YARD AT LINE E BETWEEN LINE 3 | | | | | | | | |
| 3 | 12-20 | DT | -7' FSG | 8.0 | 122.0 | 92 | 90 | 1 |
| LOCATION: TANK BACKFILL STORAGE YARD AT LINE B BETWEEN LINE 4 AND 5 | | | | | | | | |
| 4 | 12-21 | NG | -6' FSG | 7.9 | 120.7 | 90 | 90 | 1 |
| LOCATION: TANK BACKFILL STORAGE YARD AT LINE 3 BETWEEN LINE A AND B | | | | | | | | |
| 5 | 12-21 | NG | -6' FSG | 9.9 | 128.6 | 96 | 90 | 1 |
| LOCATION: TANK BACKFILL STORAGE YARD LINE 4 AND 5 BETWEEN LINE D AND C | | | | | | | | |
| 6 | 12-21 | NG | -4' FSG | 11.8 | 106.5 | 87 | 90 | 2 |
| LOCATION: TANK BACKFILL STORAGE YARD LINE 1 AND 2 AT LINE D, TEST FAILED | | | | | | | | |
| 7 | 12-21 | NG | -4' FSG | 11.4 | 110.5 | 90 | 90 | 2 |
| LOCATION: RETEST OF TEST #6 | | | | | | | | |
| 8 | 12-21 | NG | -4' FSG | 10.5 | 109.7 | 90 | 90 | 2 |
| LOCATION: TANK BACKFILL STORAGE YARD AT LINE 4 BETWEEN LINE B & C | | | | | | | | |
| 9 | 12-21 | SC | -2' FSG | 9.3 | 120.2 | 98 | 90 | 2 |
| LOCATION: TANK BACKFILL STORAGE YARD AT LINE 3 BETWEEN LINE C | | | | | | | | |
| 10 | 12-21 | SC | -2' FSG | 10.9 | 119.7 | 97 | 90 | 2 |
| LOCATION: TANK BACKFILL STORAGE YARD AT LINE D BETWEEN LINE 2 AND 3 | | | | | | | | |
| SMITH-EMERY COMPANY - LOS ANGELES | | | | | | | | |
| TABLE 1 | | | | | | | | |

SMITH-EMERY COMPANY

January 9, 1991

SECo File No.: 22381

SECo Report No.: G-91-5026

Project: Maple-Ferris Partnership
Santa Fe Springs, California

RESULTS OF MAXIMUM DENSITY/OPTIMUM MOISTURE TESTS

| Soil Type | Classification | Maximum Density (PCF) | Optimum Moisture, (%) |
|--------------|----------------------------|--------------------------|--------------------------|
| 2 | CRUSHED MISCELLANEOUS BASE | 122 | 10.0 |
| 1 | FINE TO MEDIUM SAND | 133 | 8.2 |

SMITH-EMERY COMPANY - LOS ANGELES
TABLE 2

100

I.D. 78-1-10

LOCATION KEY

| | |
|--------------------------|-------------------------|
| BF - Backfill | SD - Storm Drain |
| BP - Building Pad | SW - Sewerline |
| ELC - Electrical | TR - Trench |
| EXC - Excavation | WL - Wall |
| FTG - Footing | WTL - Waterline |

ELEVATION KEY

| | |
|---------------------|------------------------|
| SG - Subgrade | FSG - Finish Subgrade |
| FG - Finish Grade | FAB - Finish Agg. Base |
| AB - Aggretate Base | BTM - Bottom |
| <i>Handwritten:</i> | <i>Handwritten:</i> |
| <i>Handwritten:</i> | <i>Handwritten:</i> |
| <i>Handwritten:</i> | <i>Handwritten:</i> |

METHOD KEY

SC - Sandcone
NG - Nuclear Gage
DT - Drive Tube

[illegible]

LABORATORY
STANDARD: 77-107

SOIL TYPE

**¾ OPTIMUM
MOISTURE**

MAXIMUM DRY
DENSITY, PCF

SMITH-EMERY COMPANY

781 East Washington Boulevard
Los Angeles California 90021
(213) 749

| | | |
|---|-----|-----|
| 1 | 9.2 | 103 |
| | | |
| | | |
| | | |
| | | |

APPENDIX I
HEALTH AND SAFETY PLAN

**CLEAN UP TECHNOLOGY, INC.
HEALTH AND SAFETY SITE PLAN**

A. Site Description

Date: December 12, 1990
Location: 9620 Santa Fe Springs Road
City: Santa Fe Springs, California
Hazards: Acetone
Area Affected: Possibly tank area

Surrounding Population: 16,400
Topography: Gently sloping
Weather Conditions: Mediterranean climate

Additional Information:

B. Entry Objectives - The objective of the initial entry to the contaminated area is to:
Underground storage tank removal

C. On-Site Organization and Coordination - The following personnel are designated to carry out the state job functions on-site. (Note - one person may carry out more than one job function.)

Project Team Leader: Mark Hamilton
Site Safety Officer: John R. White
Record Keeper: John R. White
Field Team
Members: John R. White
Kris Kolassa
Robert Pearl

Local Agency Reps:
Los Angeles county Department of Public Works
Santa Fe Springs Fire Department

Contractor: Clean-up Technology, Inc.

All personnel arriving or departing the site should log in and out with the record keeper. All activities on-site must be cleared through the Project Team Leader.

D. On-Site Control

John White has been designated to coordinate access control and security on-site. A safe perimeter has been established at:

30 feet around the tank removal area

No unauthorized person should be within this area.

The on-site Command Post and staging area have been established at:

The northeast area of the storage shed

The prevailing wind conditions are: Relatively calm

Control boundaries are identified by: Yellow caution tape

E. Hazard Evaluation

The following substance(s) are known or suspected to be on-site. The primary hazards of each are identified.

| <u>Substances Involved</u> | <u>Concentrations (if known)</u> | <u>Primary Hazards</u> |
|--------------------------------|--------------------------------------|--|
| Acetone | Unknown | Inhalation, ingestion and skin or eye contact |

F. Personal Protective Equipment

Based on evaluation of potential hazards, the following levels of personal protection have been designated for the applicable work areas or tasks.

| <u>Location</u> | <u>Job Function</u> | <u>Level of Protection</u> |
|-----------------|----------------------------|----------------------------|
| Exclusion Zone | <u>Equipment Operators</u> | A B <u>C</u> D Other |
| | <u>Truck Drivers</u> | A B <u>C</u> D Other |
| | <u>Field Personnel</u> | A B <u>C</u> D Other |
| | _____ | A B C D Other |

Contamination
Reduction Zone

Equipment Operators
Truck Drivers
Field Personnel

| | | | | |
|---|---|---|----------|-------|
| A | B | C | <u>D</u> | Other |
| A | B | C | <u>D</u> | Other |
| A | B | C | <u>D</u> | Other |
| A | B | C | D | Other |

Specific protective equipment for each level of protection is
as follows:

Level A _____

Level C Respirator and Tyvek _____

Suits*. Also Level D protection _____

Level B _____

Level D Hardhat, steeltoe boots, _____

and safety glasses _____

*Tyvek Suits optional for equipment operators

Other:

If air-purifying respirators are needed, particulate is the appropriate canister for use with the involved substances and concentrations. A competent individual has determined that all criteria for using this type of respiratory protection have been met.

NO CHANGES TO THE SPECIFIED LEVELS OF PROTECTION SHALL BE MADE
WITHOUT THE APPROVAL OF THE SITE SAFETY OFFICER AND THE PROJECT TEAM
LEADER.

G. On-Site Work Plans

Work party(s) consisting of 2-3 persons will perform the following tasks:

Monitor excavation of tank, pump out, rinse and prep tank for removal. Also secure tank for transforation.

Project Team Leader: John R. White - Supervise all activity on job site.

Work Party #1: Excavation operator and excavation monitor - excavate tank

Work Party #2: Tank rinsing crew - rinse tank and prep for removal.

Work Party #3: Tank removal crew - lift and load tank for transforation.

The work party(s) will be briefed on the contents of this plan prior to job.

H. Communication Procedures

Personnel in the Exclusion Zone should remain within sight of the Project Team Leader.

Whistle is the emergency signal to indicate that all personnel should leave the Exclusion Zone.

The following standard hand signals will be used in case of failure of radio communications:

Hand gripping throat — Out of air, can't breathe

Grip partner's wrist or — Leave area immediately both hands around waist

Hands on top of head — Need assistance

Thumbs up — OK, I am alright, I understand

Thumbs Down — No, negative

I. Decontamination Procedures

Personnel and equipment leaving the Exclusion Zone shall be thoroughly decontaminated. (The standard level ___ decontamination protocol shall be used with the following decontamination stations): Remove Tyvek and dispose of properly

Emergency decontamination will include the following stations:
Eyewash, hand held shower available at Clean-Up Technology Field Vehicle.

Water will be used as the decontamination solution.

J. Site Safety and Health Plan

1. John R. White is the designated Site Safety Officer and is directly responsible for safety recommendations on site.

2. **Emergency Medical Care**

Presbyterian Intercommunity Hospital, at 12401 Washington Blvd. Phone (213) 698-0811 is located ____ miles from this location.

Local ambulance service is available from AME at phone (213) 698-8011. Their response time is 4 minutes.

First aid equipment is available on-site at the following locations:

First-aid kit: Clean-Up Technology Field Vehicle

Emergency eye wash: Clean-Up Technology Field Vehicle

Emergency shower: Clean-Up Technology Field Vehicle

Fire Extinguisher: Clean-Up Technology Field Vehicle

Other: _____

Other: _____

Emergency medical information for substances present:

| <u>Substance</u> | <u>Exposure Symptoms</u> | <u>First-Aid Instructions</u> |
|------------------|--|--|
| Acetone | Irritation of eyes, nose and throat, headaches, dizziness and dermatitis | Eyes - irrigate immediately Skin - wash with soap & water Inhalation - move to fresh air, perform artificial respiration Ingestion - get medical attention and give water and induce vomiting |

List of emergency phone numbers:

| <u>Agency/Facility</u> | <u>Phone Number</u> | <u>Contact</u> |
|------------------------|-----------------------|---------------------------------|
| Police: | 911 | <u>On duty officer.</u> |
| Fire: | 911 | <u>On duty Fireman/Captain.</u> |
| Hospital: | <u>(213) 698-0811</u> | <u>E.R. Nurse</u> |

3. Environmental Monitoring:

The following environmental monitoring instruments shall be used on-site (cross out if not applicable) at the specified intervals.

| | |
|---------------------------|---|
| Combustible Gas Indicator | continuous/hourly/daily/other- Upon tank removal and before excavation |
| O2 Monitor | continuous/hourly/daily/other-_____ |
| Colorimetric Tubes | continuous/hourly/daily/other-_____ |
| HNU/OVA Fixed Stations | <u>continuous</u> /hourly/daily/other- During tank excavation |
| Other: | |
| Other: | |

4. Emergency Procedures (should be modified as required for incident)

The following standard emergency procedures will be used by on-site personnel. The Site Safety Officer shall be notified of any on-site emergencies and be responsible for ensuring that the appropriate procedures are followed.

Personnel Injury in the Exclusion Zone: Upon notification of an injury in the Exclusion Zone, the designated emergency signal whistle shall be sounded. The rescue team will enter the Exclusion Zone (if required) to remove the injured person. The Site Safety Officer/Project Team Leader should evaluate the nature of the injury, and the affected person should be decontaminated to the extent possible prior to movement to the Support Zone. Contact should be made for an ambulance and with the designated medical facility (if required). No persons shall re-enter the Exclusion Zone until the cause of the injury or symptoms is determined.

Personnel Injury in the Support Zone: Upon notification of an injury in the Support Zone, the Project Team Leader/Site Safety Officer will assess the nature of the injury. If the cause of the injury or loss of the injured person does not affect the performance of site personnel, operations may continue, with the on-site Safety Officer initiating the appropriate first aid and necessary follow-up as stated above. If the injury increases the risk to others, the designated emergency signal whistle shall be sounded and all site personnel shall move to the decontamination line for further instructions. Activities on-site will stop until the added risk is removed or minimized.

Fire/Explosion: Upon notification of a fire or explosion on-site, the designated emergency signal whistle shall be sounded and all site personnel assembled at the decontamination line. The fire department shall be alerted and all personnel moved to a safe distance from the involved area.

Personal Protective Equipment Failure: If any site worker experiences a failure or alteration of protective equipment that affects the protection factor, that person and his/her buddy shall immediately leave the Exclusion Zone. Re-entry shall not be permitted until the equipment has been repaired or replaced.

Other Equipment Failure: If any other equipment on-site fails to operate properly, the Project Team Leader and Site Safety Officer shall be notified and then determine the effect of this failure on continuing operations on-site. If the failure affects the safety of personnel or prevents completion of the Work Plan Tasks, all personnel shall leave the Exclusion Zone until the situation is evaluated and appropriate actions taken.

Additional Available Safety Equipment: While the known site contaminate levels do not warrant prescribed use of dust masks, goggles, or protective clothing these items will be made available on a demand basis. During project start-up field measurements will be made to confirm contaminant/exposure levels. This will be undertaken by use of personnel air monitors and air monitoring stations located at the screening unit and solidification unit.

Personnel protective equipment which is provided and/or available for use shall be in good working order. Personnel using equipment will be properly fitted and trained in its operation.

5. Personal Monitoring:

The following personal monitoring will be in effect on-site:

Personal exposure sampling:

Medical monitoring: The expected air temperature will be 65F. If it is determined that heat stress monitoring is required (mandatory if over 70F) The following procedure shall be followed:

A 15 minute break every two hours. All on site personnel will have water. Monitor pulse and body temperature.

A medical screening program will be mandatory for all CUT employees and contractors who may be potentially exposed to hazardous materials for thirty days or more during the subsequent twelve month period.

All site personnel have read the above plan and are familiar with its provisions.

Name

Signature

Site Safety Officer: John R. White

Project Team Leader: Mark D. Hamilton

Other Site Personnel: Kris Kolassa

APPENDIX J
TANK SOLID DISPOSAL MANIFESTS



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT
P.O. Box 7035
Indianapolis, IN 46207-7035

PLEASE PRINT OR TYPE

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0035. Expires 9-30-91

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

C.A.D.9.8.2.4.8.4.9.3.3

Manifest
Document No.

0.0.0.2.3

2. Page 1

1 of 1

Information in the shaded areas is
not required by Federal law, but
items D, F, H and I are required by
State law.

3. Generator's Name and Mailing Address

ERICKSON, INC.

13738 SLOVER AVENUE, FONTANA, CA 92335

4. Generator's Phone (714) 355-5601

5. Transporter 1 Company Name

6. Use EPA ID Number

7. Transporter 2 Company Name

8. Use EPA ID Number

9. Designated Facility Name and Site Address

INDUSTRIAL FUELS AND RESOURCES

604 S. SCOTT STREET

SOUTH BEND, IN.

10. Use EPA ID Number

I.N.D.9.8.0.5.9.0.9.4.7

A. State Manifest Document Number

INA 0495153

B. State Generator's ID

HAH036-035916

C. State Transporter's ID

D. Transporter's Phone

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

(219) 234-0441

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No. Type

13. Total

Quantity

14. Unit

Wt/Vol.

Waste No.

a. RQ, WASTE OIL COMBUSTIBLE LIQUID,
NA1270 (D001, D018, D008, D039, D040, F002)

0.1.3 d.m

6.9.0.0

P

223,724
D001, D018, D040
D008, D039, F002

b. RQ, HAZARDOUS WASTE SOLID N.O.S. ORM-E
NA9189 (D002, F002, F003, F005, D018, D022)

0.0.1 D.M

2.0.0

P

181
D002, F002, F003
F005, D018, D022

c. RQ, WASTE RESIN SOLUTION, FLAMMABLE
LIQUID UN 1866 (D001)

0.0.5 D.M

2.1.0.0

271
D001

J. Additional Descriptions for Materials Listed Above

11a. WASTE OIL SLUDGE AA-010480 ERG 27

11b. ACID/SOLVENT SOLIDS-AA010782 ERG 31

11c. OFF SPEC. RESIN-AA010773 ERG 26

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

GLOVES, SAFETY GLASSES

24 HOUR EMERGENCY CONTACT - JIM DIPPELL (415) 231-2525

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

JIM DIPPELL

Signature

Jim Dippell

Month

02

Day

04

Year

91

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted Item 19

Printed/Typed Name

Signature

Month

Day

Year

311/24 1-43. (day or night, and the
National Response Center at 800/424-8802 or 202/426-2675.

INA 0495153

APPENDIX K
TANK RINSEATE MANIFEST

Please print or type. Form designed for use on elite (12-pitch typewriter).

90654894

USE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RE

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. CAC00005179512 | Manifest Document No. 90654894 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|--|--|--|---|---------------------------------|---|
| 3. Generator's Name and Mailing Address MAZE - FERRIS PARTNERSHIP 10601 NORWALK BLVD SANTA FE SPRINGS, CA 90670 | | | A. State Manifest Document Number 90654894 | | |
| 4. Generator's Phone (213) 944-0102 | | | B. State Generator's ID HYH101361-1030010 | | |
| 5. Transporter 1 Company Name NIETO AND SONS TRUCKING | | | C. State Transporter's ID 124014 | | |
| 6. US EPA ID Number CAT080016116 | | | D. Transporter's Phone 714-388-6855 | | |
| 7. Transporter 2 Company Name | | | E. State Transporter's ID | | |
| 8. US EPA ID Number | | | F. Transporter's Phone | | |
| 9. Designated Facility Name and Site Address PETROLEUM RECYCLERS INC. 1835 E. 29th STREET SIGNAL HILL, CA 90806 | | | G. State Facility's ID | | |
| 10. US EPA ID Number CAT080011059 | | | H. Facility's Phone 213-595-6597 | | |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | 12. Containers No. Type | 13. Total Quantity | 14. Unit Wt/Vol | 15. Waste No. |
| a. NON RCRA HAZARDOUS WASTE LIQUID | | 9 0 1 T T | 1-1-810 | G | 241 EXEMPT |
| b. | | | | | |
| c. | | | | | |
| d. | | | | | |
| J. Additional Descriptions for Materials Listed Above NO SMOKING GLOVES GOGGLES | | | K. Handling Codes for Wastes Listed Above | | |
| 15. Special Handling Instructions and Additional Information DEMENNO KERDOON CAT080013352 2000 N. ALAMEDA 213-537-7100 COMPTON, CA 90222 | | | GIBSON OIL REFINERY CAD980883177 COMMERCIAL DRIVE 805-327-0413 BAKERSFIELD, CA 93308 | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | |
| Printed/Typed Name JOHN MAZE | | Signature <i>[Signature]</i> | | Month Day Year | |
| 17. Transporter 1 Acknowledgement of Receipt of Materials | | Printed/Typed Name Jesse Camacho | | Signature <i>[Signature]</i> | |
| 18. Transporter 2 Acknowledgement of Receipt of Materials | | Printed/Typed Name | | Signature | |
| 19. Discrepancy Indication Space | | | | | |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. | | | | | |
| Printed/Typed Name | | Signature | | Month Day Year | |